



CHILD AND FAMILY SERVICES JUVENILE PROBATION

SYSTEM IMPROVEMENT PLAN 2011 UPDATE



2010-2013

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SIP NARRATIVE

SIP PROCESS:

Stanislaus County Child and Family Services and Juvenile Probation collaborated to complete the System Improvement Plan (SIP), as was done for both Peer Quality Case Review (PQCR) and the County Self Assessment (CSA). Information gathered during Stanislaus County's PQCR and Self Assessment processes was used in conjunction to System Improvement Plan workgroups held in June and July 2010 to identify focus areas and strategies for the county SIP.

SIP workgroups were focused on one target outcome per session in order to gather the richest information from the widest audience. Both divisions addressed placement stability, as was the case during PQCR. Since the populations with the most placement disruptions are adolescent youth, many of whom become involved with both Child and Family Services and Juvenile Probation; it was deemed advantageous to conduct a workgroup with the community jointly, rather than individually. Additional brainstorming sessions were held to focus on each of the other outcomes: timely reunification, recurrence of maltreatment and permanency for children and youth.

Social Workers and Probation Officers were the focus of interviews during the PQCR process. In addition, focus groups were held at that time with current and former foster youth from CFS and probation, Foster Family Agency social workers, Supervisors and foster parents.

For the Self Assessment, focus groups were held with all social workers and supervisors from CFS by unit/program. In addition, a joint session was conducted with agency and community partners, including the Child Abuse Prevention Council (CAPC) members, which includes community partners, volunteer members, parent consumers and other important stakeholders for child abuse and neglect.

(See Attachments, pages 65, 66 for attendees for workgroups)

CHILD WELFARE OUTCOMES ADDRESSED IN SIP:

Child & Family Services identified four outcomes as the focus of the 2010-2013 System Improvement Plan (SIP). Though opportunities for growth exist in other areas, these were the outcomes determined to be the most critical. Outcomes include:

1. Recurrence of Maltreatment

Recurrence of abuse and neglect is a safety measure that has been the consistent priority of Stanislaus County over the years. At the time of the SIP Development in 2010, we were nearing the National Standard, it continued to be the focus of our efforts. Given significant shortfalls in county funding that resulted in an approximately 29% reduction in the Child and Family Services budget in 2010/2011 compared to two years ago, a number of important services were dismantled that could negatively impact outcomes. These included but were not limited to Families in Partnership (intensive Family

Preservation), Differential Response for children 6 – 17 years, and sober living. Our priority continued to be the safety of children in our community. Our most recent data report (July 2011: Data Extract Quarter 4 2010)¹, indicated that the percentage of children who were victims of abuse or neglect and whom did not have a subsequent substantiated allegation within the following six months increased to 94.6%, thus meeting the National Standard of 94.6%.

To address the need for Differential Response services for youth ages 6-17 CBCAP funding was designated at the preexisting Hutton House site. In addition Stanislaus County received permission from the Office of Child Abuse Prevention to roll over unspent CBCAP dollars from a previous year. To promote child safety this funding was utilized for respite child care at the Children's Crisis Center. For fiscal year 2011-2012 CBCAP funding will be dedicated to the Haven's Kids Count program. This school based domestic violence prevention program provides counseling and education for elementary school age children and their families.

During the second half of 2010, the numbers of children placed in foster care increased because of the lack of sober living and intensive in-home services that could ensure that children could remain safely at home. The number of children served in pre-placement preventative services declined as only the most serious situations that did not require court intervention were provided with any type of case management service due to the staffing reductions. To address this gap, child welfare further partnerships with both the private and faith community, as well as the child abuse prevention council to leverage private funds, grants, trust funds and anonymous donations to provide the local match for child welfare services. Two local sober living programs closed because of the budget reductions and the third was at risk. The additional child welfare allocation ensured that the remaining sober living home stayed viable and could resume accepting child welfare clients early in 2011. By July 1, 2011, sober living, substance abuse treatment, and parenting services were restored to earlier funding levels.

2. Placement Stability

The 2009 PQCR process focused on the stability of placements for children and youth in foster care for 24 months or more. The group with the least stability was the children and youth ages 11 – 15 years of age. According to Safe Measures, 11 – 17 year old children who were in placement from July 1, 2010 and June 30, 2011 for 24 months or more were not meeting the National Standard of 41.8 percent in the most recent review period.² Only 13.8% of 11 – 15 year olds had two or fewer placements, while only 10.7% of 16 – 17 year olds had two or fewer placements.

Our analysis through PQCR and Self Assessment pointed us to the importance of partnership with Foster Family Agencies (FFAs) as the majority of our children are placed in their certified homes. Relative caregivers were

also an important factor in placement stabilization, yet our PQCR and self assessment process indicated that we are not consistently thorough in our relative assessment processes. When initial relative placements fail, further exploration does not consistently occur.

3. Timely Reunification

Timely reunification, without foster care re-entry, is an important priority to the agency. Engagement of families, particularly those with substance abuse issues was an identified challenge for social workers. From our Self Assessment it was clear that the rich array of pre-placement services results in only the most resistant becoming involved with the court system. Reunification can be longer when the family has already received and been unsuccessful in pre-placement preventative services.

Recent data from Safe Measures indicates that children who exited foster care to reunification during the 12 month period between 07/01/2010 and 06/30/2011, 68.7% exited within 12 months of entering foster care. We are still below the 75.2% National goal for this measure. The median time to reunification was 7.8 months, which exceeded the National goal of 5.4 months.³

Prior to our significant budget cuts, a substance abuse counselor was collocated at Child and Family Services to assess refer and engage families with substance abuse issues. That was a more efficient practice than simply referring a parent to a community based organization and leaving it to them to participate in an assessment, drug testing and treatment. With the elimination of substance abuse counselors and higher caseloads, we were not able to engage parents in substance abuse assessment here at the agency or in the parents' home, but depended on them to follow through with referrals on their own. This delays and may in some cases reduce the success that we have had at getting parents into treatment. For the budget year, 2011/2012, we have reinstated the funding for 3 substance abuse counselor positions, but as of this update, the positions have yet to be filled.

Additionally, substance abuse counselors have the expertise necessary to assess and more effectively engage substance using parents. Our social workers do not necessarily have the same level of experience in assessment and treatment. Enhancing family engagement skills and motivational interviewing may help social workers to develop further expertise with this difficult population.

4. Permanency, including Reunification, Adoption & Guardianship

Permanency for children and youth is essential and contributes significantly to the other outcomes. Children and youth who have been in foster care for longer amounts of time, without any permanent home situation, are statistically more likely to experience a placement disruption. Our assessment

shows that our county is challenged to find county foster homes and relatives for our foster youth.

A review of the July 2011 Outcome Report (Quarter 4 2010 Extract) indicates that only 12.3% of children in foster care for 24 months or more between 1/1/2010 and 12/31/2010 exited to some form of permanency.¹ This is a decline from the baseline of 18.2% for this SIP. This may in large be attributed to the continued fiscal challenges of Stanislaus County over the past two years which have resulted in the reduction in resources to address permanency, such as the elimination of the following positions: permanency specialist, 3 adoptions social workers, 2 team decision meeting facilitators, permanent placement social workers, and the foster parent recruiter trainer. In conjunction with a corresponding increase in caseload sizes (in court foster care related programs) and children in foster care, our success ability to successfully implement various best practice strategies has diminished.

OTHER CHILD WELFARE OUTCOMES NOT MEETING NATIONAL STANDARD:

1. Reentry Following Reunification:

At the writing of the SIP in 2010, 8.7% of our children re-entered foster care following reunification. As this was better than the National standard, it was not included as a targeted outcome in the SIP. In the July 2011 Quarterly Data Extract (Q4 2010), our re-entry rate increased to 10.6% which is thus not meeting the standard. More specifically 14 of 134 children who reunified between 01/01/2009 and 12/30/2009 re-entered foster care within 6 months.¹ A review of Safe Measures shows that for children reunified between 07/01/2009 and 06/30/2010, only 7.6% of re-entered foster care within 6 months.⁴ This more recent data, which also predates the implementation of our current SIP strategies, indicates we are performing above the National Standard. There could be many factors that contribute to the increases and decreases in our re-entry rate into foster care: the comparably small population sizes, large sibling groups, significantly depressed economy, poor or limited housing, high unemployment rates, and many other factors. It is not unusual for the return of children to their parents to be the courts decision, against the social workers recommendation that the circumstances that led to the removal have not really resolved despite the completion of a treatment program or parenting class.

2. Adoption:

Stanislaus County continues to excel at most of our Adoptions measures despite the significant reduction in adoptions social workers. In the July 2011 Quarterly Data Extract (Q4 2010), 85% of children adopted between 1/1/2010 and 12/31/2010 exited within 24 months of entering foster care, far exceeding that National Standard of 36.6%.¹ The areas within the Adoption composite that Stanislaus County is not meeting includes is the percent of children who are adopted within 12 months of entering foster care (11.8% versus the National

standard of 22.8%)¹ and the percent of children in care 17 months or more who are legally free for adoption within 6 months (5.1% versus the National Standard of 10.9%).¹ The most likely explanation for these outcomes is related to the provision of “reasonable” reunification services. Overall there is a perceived conservative approach by the court to ensure that termination of services, and subsequently parental rights, are justified. Additionally, Stanislaus County has long held the practice of not terminating parental rights (TPR) unless a permanent home is available to the child. Many older youth are bonded to their parents and TPR is determined to not be in their best interest.

3. Timely Response (10-day Referrals):

Stanislaus has consistently met that National Standard (90%) for in person responses for 10 day referrals, but fell slightly per the July 2011 Quarterly Data Extract (Q4 Oct 2010 – Dec 2010), to 87.3%. (<http://www.childsworld.ca.gov/res/CtyReport/Jul11/jul11stanislaus.pdf>). The September 2011 Quarterly Data Extract (Q1 Jan 2011 – Mar 2011) also falls below the 90th percentile as required, with 89.5%.¹ The best explanation for this observed performance slip is the significant cuts in staffing and the large number of Leaves of Absence (LOA) of agency social workers. The caseloads have been such that social workers are prioritizing the immediate responses (within 2 hours) and are not always able to make timely contact on the 10-day referrals. A review of Safe Measures for Quarter 2 2011, shows an improvement in the measure to 90.3%, just over the National Standard.⁵

PROBATION OUTCOMES ADDRESSED IN THE SIP:

1. Placement Assessment Tool (In addition to the risk/needs assessment tool already being utilized for this population)

See Placement Matching below.

2. Placement Matching

Research found very little to no validated placement assessment/matching tools that exist to assist in helping officers match minors with placements. One website www.cacfs.org has an online matching system that allows a user to select characteristics of a minor (i.e. age, gender, 602/300 WIC, etc) and the type of placement (i.e. RCL, sex offender, arson, drug treatment, etc) which then generates a list of potential placements for the minor. Officers then need to follow up with contacting the agency and making the required referral, if appropriate.

While this site “matches” minors, it is user driven and the results are based on those placement facilities that utilize the system and their respective vacancies. In summary, the outcomes or matches are based on those facilities whose subscribe to the site and officer’s chosen criteria. While the site appears to be somewhat comprehensive, more evaluation/analysis of this

site's usefulness needs to be conducted. See Strategies 7.0 and 8.0 in Matrix for extended timelines to research additional options. As this on-line site is expanded, it may be more beneficial to officers. Officers are presently utilizing the system to test its feasibility; however, additional use and tracking/evaluation of the results of these placement matches needs to be implemented.

3. Family Engagement

Caseloads in the placement unit have increased by 34% over the last fiscal year. This has had an impact on officers' abilities to increase family engagement while still meeting the required monthly contacts and data entry into state and local database systems. That said, the Probation Department has been able to increase family contacts with minors in placement and their families through the use of video conference hardware/software. A Family Video Conferencing Room has been established on site at the Probation Department where family members meet with placement minors via video conference technology. These meetings are approximately 30 to 45 minutes in length, semi-private and held as often as appropriate (i.e. based on the minor's progress, staff availability to set up the meeting and monitor, parent/family availability, etc). This has been very successful with minors housed in out-of-state placements as there are obvious barriers to family reunification and engagement due to the distance. With the video conferencing, it appears that family engagement is being positively impacted. Additional use and monitoring of this engagement process needs to be conducted to evaluate its impact on placement stability over time. See Strategy 9.0 for additional timeframes for evaluating this process.

RESEARCH:

Child and Family Services:

A number of evidenced-based practices are used or targeted for use in Stanislaus County's Child and Family Services Division. Differential Response (California's version of Alternative Response) is one such program. Differential Response (DR) has been found to be effective as a child abuse prevention and early intervention strategy. Our own data demonstrates clear improvements in the percentages of children who do not experience a recurrence of maltreatment since DR was implemented in 2005. While funding reductions necessitated its elimination for children 6 to 17 years of age during FY 2010/2011, it continued for children 0 – 5 years. Due to a variety of innovative funding strategies, Differential Response for 6 to 17 year olds was reinstated beginning July 1, 2011.

Motivational Interviewing is a practice that is well supported by research evidence. It has been shown to improve substance abuse outcomes by itself, in addition to other practices. Motivational Interviewing has been identified as a targeted practice for

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training and implementation with social workers and community partners, such as Public Health Nurses and Family Resource Center's DR workers.

The Family to Family model has demonstrated promising research evidence in relation to permanency outcomes. Stanislaus County Child and Family services implemented the Family to Family Initiative beginning in 2002, and began having Team Decision Making (TDM) meetings in 2003. Unfortunately, due to recent budget challenges, TDM facilitators, supervisor and scheduler positions have been eliminated from the 2010/11 budget. As a result, Stanislaus County is encouraging a TDM-like meeting at the discretion of the social worker and supervisor, but is not able to mandate the evidence-based practice.

Another Family to Family strategy that Stanislaus County will expand is that of Community Partnership. In building on this existing strategy, Child and Family Services will be partnering with the community, including faith-based organizations and the United Way, to help support families at risk of child abuse and neglect prior to, during or following the provision of child welfare services.

Wraparound is a strategy for permanency and child well-being that has demonstrated promising research evidence, particularly in the area of placement stabilization. Stanislaus County implemented a wraparound program in January 2011.

Probation:

Based on UC Berkeley data for the Probation Department, there is a need to evaluate whether minors are being properly initially and, when applicable, subsequently placed. A review of the research literature indicates that placement stability is greatly affected by the type of placement (i.e. matching the minor's needs) and the number of placement settings experienced. Therefore, placement stability was chosen as the preferred focus area.

During the PQCR, it was evident that the probation cases reviewed indicated a theme of utilizing case management and documentation of monthly visits, contact with minors and follow up with mental health and behavioral health professionals. Probation officers regularly reviewed case plans with youth and received their feedback. Additionally, low case loads allowed officers to maintain contact with group homes and provide them with updated health and education information. However, it was also found in the areas of youth assessment and placement matching that a validated assessment tool was not utilized in making initial or subsequent placement decisions. Furthermore, even though case documentation may be up-to-date, the anecdotal information or experiences probation officers have with minors is sometimes lost when cases are transferred between officers unless they are clearly noted in the file.

CURRENT ACTIVITIES:

Child and Family Services:

See Attachment Section for SIP Strategy Matrix (page 59)

Probation: The Probation Department is currently engaging families to participate in reunification plans through on going monthly face-to-face or written contact with parents/guardians. Even for those minors in permanency planning where the goal is emancipation (more specifically, independent living with identification of a caring adult to serve as a life-long connection), the probation officers are still seeking to engage parents/guardians in assisting in the youth's transition to adulthood. Because of the nature of probation cases, probation officers routinely attempt to involve parents/guardians in the minor's overall case plan development, if available.

The Probation Officers currently have access to a website managed by the California Alliance of Child and Family Services (<http://www.cacfs.org/AboutUs>) which allows officers to search for appropriate placement vacancies based on a minor's demographics, delinquent status and/or they specific needs (arson, sex offender, etc). This has been used sparingly to identify appropriate placements for probation youth; unfortunately, the service does not encompass all California agencies, only those that have current vacancies. This could be considered a form of a "matching tool"; yet it is driven by the consumers of the website and not clinically validated.

NEW ACTIVITIES:

Child and Family Services:

Include Foster Family Agencies in Joint Assessment Meetings to make concurrent planning, permanency decisions and identify potential adoptive or other permanent homes.

Quarterly Adoption Meetings to coordinate with licensed adoption agencies serving Stanislaus County youth to ensure all children with a permanent plan of adoption find an adoptive family.

Motivational Interviewing to improve social worker, Family Resource Center and Public Health Nurse (PhN) engagement of families, particularly those with substance abuse issues.

In November 2010, Child and Family Services decided to change to a statistically reliable and valid tool for risk and safety assessment, Structured Decision Making (SDM), from the previously used Comprehensive Assessment Tool (CAT). The implementation team formed and prepared for the March 2011 training and April 2011 implementation of SDM throughout all programs.

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Probation: As far as new activities utilized by Probation, the placement unit is beginning to improve family participation so that youth could reunify in a timely manner. To do this, probation will be utilizing CWSOIP funds to do the following:

1. Provide lodging/travel/food costs for parents to visit minors in placement as part of case/reunification plan.
2. Provide Transportation costs not paid for by Group Home/FFA for weekend furloughs of minors to visit family as identified in their reunification/case plan.

It can be very difficult to engage a family in the placement process once the minor has been ordered into out of home care. Probation knows that a minor has a better chance of being successful when the family is involved and participates in his/her treatment and placement program. Therefore we hope to engage families through these efforts to improve the success we have with our minors in out-of-home placement.

Furthermore, maintaining accountability of the minor while in the facility and during the duration of the placement episode is vital to the minor's success, especially when reunification is the plan. Therefore, the following additional activity is going to be implemented:

1. Increased placement visits (in addition to monthly face-to-face contact) to include weekend and evening contacts to hold minor and Group Home/FFA accountable for program compliance.

ACTIVITIES LINKS TO OUTCOMES:

Child and Family Services:

Child and Family Services has many strategies outlined in the matrix designed to address the four (4) targeted outcomes. While none replace the many services and programs lost due to the dire budget situation, each builds on positive worker practices and partnerships with the community to ensure safety, permanency and well-being of foster youth.

Probation:

Through increased family participation in the reunification process, and by targeting the delivery of services to these families in the form of transportation, lodging and food costs, it would be expected that the placement stability would improve for those affected minors.

CAPIT/CBCAP/PSSF PLAN:

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The CAPC committee who governs the distribution of CAPIT, CBCAP and Children's Trust funds were included as key stakeholders in the System Improvement Plan (SIP) process.

PQCR Narratives

Stanislaus County's PQCR was held over the course of three days from September 22 through 24, 2009. Each peer review team was comprised of two child welfare social workers and/or supervisors and one juvenile probation officer. Interview teams conducted a total of four interviews, three child welfare and one probation case. Stanislaus County utilized representatives from the following peer counties: Madera, Merced, San Joaquin and Tuolumne.

Probation chose cases where children had experienced instability in that the minors had been in placement more than 24 months and had more than two placements. The selected minors were still on probation and receiving services from the Department. A total of 4 probation cases were chosen and 4 interviews were conducted.

As it relates to placement stability, and based on a review and analysis of the promising practices, challenges and barriers identified in this report, it appears three major areas need to be addressed by the Probation Department:

- Placement Assessment Tool (In addition to the risk/needs assessment tool already being utilized for this population)
- Placement Matching
- Family Engagement

I. Child and Family Services

Peer Quality Case Review (PQCR) was conducted in September 2009 at the Community Services Agency. Four teams of three peer reviewers, including social workers, probation officers and supervisors, interviewed Child and Family Services social workers regarding 12 cases.

Child and Family Services selected the area of placement stability for youth ages 13 - 17 in foster care for 24 months or longer. This measure computes the percentage of children with two or fewer placements who have been in foster care for 24 months or more. Our performance in April 2009, when we identified the focus area for our PQCR, was 40.4 percent. That is just shy of the National Standard of 41.8 percent.

This measure computes the percentage of children with two or fewer placements who have been in foster care for 24 months or more. Time in care is based on the latest date of removal from the home. The denominator is the total number of children who have been in care for 24 months or more; the numerator is the count of these children with two or fewer placements. This measure contributes to the fourth permanency composite.

Although our performance related to the National Standard is not far off the mark, our County selected this area of focus due to our values and the importance we place on the success of adolescent youth while in and upon exiting foster care. The majority of our youth in foster care 24 months or longer who experience more than two placements

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are the teenagers. While placement disruptions do occur for younger children, 75% of children in placement greater than two years and have more than two placements are 13 to 17 years old.

As an Accredited Child Welfare program with the Council on Accreditation, Stanislaus County has a long history of striving for and ensuring that our child welfare program meets or exceeds best practice standards for the profession. It has long been insufficient to accept success as achieving the minimum requirements of the law, but rather to participate in continuous process improvement. As a result, Stanislaus County has sought opportunities of learning and technical assistance which include Family to Family Initiative (F2F), California Permanency for Youth Project (CPYP), Pilot 11 / Redesign participants, and most recently the California Connected by 25 Initiative (CC25I).

As part of the Family to Family Initiative, Stanislaus County Child and Family Services (CFS) implemented Self Evaluation in early 2002. Members of our agency at all levels and various partners have participated in monthly or twice monthly self evaluation meetings to analyze outcome and performance data of all types and develop strategies for improvement. As an important goal of Family to Family is to stabilize placements change rates for foster children, we began the analysis of placement disruptions at that time.

Shortly after the implementation of our Team Decision Making (TDM) meeting model, in February 2003, we began quarterly analysis of our TDM practices and placement stability rates. We have learned much from an anecdotal and qualitative perspective, but continued to desire richer case review information that may give us additional insights into our successful and non successful social work practices. In addition, we have made a number of efforts to address outcomes for adolescent youth. These include the California Permanency for Youth Project and the California Connected by 25 Initiative.

Peer Quality Case Review (PQCR) focused on placement disruptions for our most challenging to place population, that is teenagers, granted us the opportunity to conduct a more case specific examination of our most challenging cases with placement disruptions.

Common Themes:

- Youth Drug Addiction was identified as a prevalent and challenging issue that adversely affects placement stability. Substance abuse services that are specific for the adolescent population are not readily available. In discussing potential solutions to this area, it was discovered that a community organization is in the process of starting a 13 week treatment group for adolescents. Services are not billed to MediCal so CWSOIP funds will be utilized to contract for these services for the youth in foster care who need them.
- Sharing of pertinent relative, placement, youth and other information when children change social workers is an area that is not consistently addressed. The agency has

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transfer staffing and much information is documented on the transfer staffing form. In considering the observations and recommendations of the PQCR it is apparent that neither the form nor the case file contains an adequate format for summary information of the type that would better address these issues. Reviewing case files and/or CWS/CMS contact logs is a daunting task for any social worker, regardless of caseload size, so modifications to the existing form and/or summaries of issues relevant to placement disruptions may need to be integrated into practice to assist future workers to accurately capture past events.

- Child and Family Services initiatives to address permanency for youth through CPYP and California Connected by 25 Initiative have focused much of our resources and efforts on emancipation outcomes and developing life long connections for youth with a committed and caring adult. Because of the reality that some youth will emancipate from care without established legal permanency, such as adoption or guardianship, intensive efforts must be made to prepare the youth for successful independent adulthood. That is best accomplished with the commitment of at least one caring adult who will support the youth through at least the early years of adulthood. The goal of the agency is to seek out lifelong connections for youth, with the possibility that legal permanency may develop, while simultaneously preparing the youth for independent adulthood. While family finding efforts are strong when children and youth enter foster care, they diminish to some extent as the focus moves from Family Reunification to Permanent Placement. There are many valid reasons to this attribute, such as challenge of finding placement matches for difficult to place youth, youth's unwillingness to be adopted or under guardianship, youth's efforts to sabotage placements, lack of services after permanency that inhibits exiting foster care, insufficient resources to engage in intensive family finding efforts throughout the youth's stay in foster care, as well as other issues.
- Relatives are thoroughly researched and documented at the point that a youth enters foster care. These are updated annually for all youth without permanency. A lesson learned is that there may be a tendency to assume that all relatives have been ruled out early on in the dependency and reconsideration of relatives for placement would be fruitless.

II. Probation

The Probation Department selected Placement Stability as the focus area due to the number of placement changes experienced by children placed through the Stanislaus County Probation Department. Based on a review of the UC Berkeley point-in-time data for Stanislaus County Probation, 88% (24 of 27) of minors in the age range from 15-17 who were in care for at least 24 months had more than two placement settings. Only 3 minors (12%) in care for the same time frame were in two or fewer placements.

Based on the data, there is a need to evaluate whether minors in this category are being properly initially and, when applicable, subsequently placed. The Stanislaus County Probation Department has three probation officers assigned to supervise minors with placement orders. A supervising probation officer supervises these officers, as well

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as three other officers assigned to the unit. The Department has 65 children with placement orders. Probation chose cases where children had experienced instability in that the minors had been in placement more than 24 months and had more than two placements. The selected minors were still on probation and receiving services from the Department. Furthermore, over 89% of the minors with placement orders were either White or Hispanic. Therefore, a cross section of four probation cases were chosen that met the above criteria and four interviews were conducted.

A review of the research literature indicates that placement stability is greatly affected by the type of placement (i.e. matching the minor's needs) and the number of placement settings experienced. Therefore, placement stability was chosen as the preferred focus area.

During the PQCR, it was evident that the probation cases reviewed indicated a theme of utilizing case management and documentation of monthly visits, contact with minors and follow up with mental health and behavioral health professionals. Probation officers regularly reviewed case plans with youth and received their feedback. Additionally, low case loads allowed officers to maintain contact with group homes and provide them with updated health and education information. However, it was also found in the areas of youth assessment and placement matching that a validated assessment tool was not utilized in making initial or subsequent placement decisions. Furthermore, even though case documentation may be up-to-date, the anecdotal information or experiences probation officers have with minors is sometimes lost when cases are transferred between officers unless they are clearly noted in the file.

Three major areas were identified as needing to be addressed by the Probation Department:

- Assessment

Even though there are internal processes for determining proper placement of foster youth, these are more informal and based on anecdotal information or, often times, an officer's experience with similar youth. While the Probation Department utilizes a validated tool for assessing each minor's risk and needs, placement officers do not have access to an assessment tool for determining the most appropriate placement option for the minor. It was recommended that the Probation Department pursue the development of a tool or evaluation of an existing tool to aid in the initial and subsequent assessment of placement youth.

- Placement Matching

A review of the research literature indicates that placement stability is greatly affected by the type of placement (i.e. matching the minor's needs) and the number of placement settings experienced. Clearly without a validated assessment of a minor's needs, it is almost impossible to expect that a foster youth is being properly placed. Current placement matching is done utilizing prior experience with similar youth and the results a particular foster agency, group home, etc may have had with those types of youth. Youth with specific treatment needs (i.e. sex offenders, arsonist, mental health, etc) continue to be placed accordingly; however, most probation placement youth come with a variety of issues and often do not have

singular treatment focus. With introduction of a validated assessment tool, it is recommended that placement decisions are directed, in part, by the assessment. Furthermore, it was recommended that the Probation Department develop a method of measuring success rates for currently utilized foster/group homes and to track the data to create a baseline to compare against for future analysis of specific types or levels of facilities.

- Family Engagement

The PQCR process identified that placement stability is being affected, in part, on the success of the Probation Department's ability to engage families throughout the youth's placement episode. Focus on parent reunification services and follow-through on concurrent planning by utilizing relative and non-relative placements needs to be increased. It was recommended that those families/youth still receiving reunification services be directed by the Court and held accountable by Probation to actively participate in the programs/services with focus on transitioning of the youth from group home/foster care back into the home with ancillary services to be provided to assist in making the transition successful (i.e. wraparound services, TBS, etc). Additionally, it was found from the interviews that concurrent planning was not regularly discussed in the context of a documented "plan". Case plan development will ensure the inclusion of the youth and his/her parents/guardians with focus on creating documented concurrent plans should the reunification services fail. Placement findings and orders will always reflect the expected concurrent plan in those permanency cases.

County Self Assessment Narratives

Child and Family Services

(Child and Family Services summary Self Assessment information has been updated to reflect the major changes and budget reductions that have occurred since the County Self Assessment was submitted in May 2010).

Stanislaus County's Child and Family Services program has been a progressive and innovative program that has been accredited by the Council on Accreditation since 1988. We strive to demonstrate and provide services to children and families, in collaboration with our community partners that are consistent with the "best practice" standards of the profession. Since our selection as a "Pilot 11" county in 2004, we have developed a strong network of community and agency partnerships and services that provide a safety net for Stanislaus County's children and families.

Stanislaus County has been performing well on most of our State and Federal Outcome measures. We certainly have the opportunity for growth and improvement, but we have a strong agency and community culture that embraces working together to accomplish the goals. Partnerships and collaboration within our county are so strong that we have developed a shared vision and responsibility for the safety, permanency and well-being of children within our community. A number of multidisciplinary processes have been developed and strengthened to achieve the strong outcomes we observe.

Stanislaus County's rate of entry into foster care has been consistently one of the lowest in the state, that is, fewer children entered foster care than in other counties. In 2009, Stanislaus County's rate of entry into foster care was 1.7 per every 1000 children, compared to a State average of 3.1 per 1000 children. That lower rate resulted from years of prevention and early intervention efforts that sought to fund pre-placement prevention services as a means of reducing high county costs associated with foster care.

Stanislaus County has been one of the few counties in the state that has had a strong network of substance abuse services and clean and sober living environments that support children and families. These have been developed out of the partnership with mental health and various community members and organizations in order to ensure safety for children. Children have frequently resided with their parents in a supervised clean and sober housing environment while their parents were participating in treatment services. Foster care placement rates and expenses were reduced for the county as a result. The supervision provided by the facility ensured that children of substance abusing parents were appropriately cared for while parents were learning to live without drugs or alcohol. Although sober living was an excellent approach to ensuring safety, it was not a mandated service required by regulation or legislation, thus was an adjunct service that was eliminated when the budget was reduced by more than 20% in the 2010/2011 fiscal year. This budget reduction left a gap in preplacement prevention substance abuse and clean and sober living services. Two of the three major clean and sober living environments went out of business because of these budget reductions. The remaining program was at risk of closure as well. Members of the faith and private community formed a new non-profit group, Valley Recovery Resources, which collaborated with the county to reinstate sober living services in Stanislaus. This was

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accomplished because an anonymous party donated the necessary local match to draw down the previously inaccessible state and federal child welfare dollars. In addition to reinstating sober living services in 2011, other services and staffing were restored.

In addition, our approaches to serving families have relied heavily on a multidisciplinary team approach, rather than serving families in various silos. Examples included the Families in Partnership program that serviced families with substantiated abuse or neglect and the Multidisciplinary Team (MDT) that serves Differential Response families.

The Families in Partnership (FIP) program had been a very unique and innovative program. Where as others struggle to facilitate communication between child welfare social workers, mental health clinicians, substance abuse counselors and public health nurse, Stanislaus made all those part of a team who worked together to serve the same children and families they might have served separately. What resulted was a more effective, coordinated system of support that prevented children from entering foster care unnecessarily. FIP worked with families at high risk of foster care entry by providing intensive family preservation services. This strong emphasis on pre-placement, preventative services resulted in fewer children entering foster care unnecessarily and provided improved permanency. As Department budgets have diminished, the county share of cost of team members has moved from the contributing department to Child and Family Services. The Board of Supervisors has provided the county share for the FIP program in very recent years, as Child and Family Services cost of doing business began to surpass the allocation. In the 2010/2011 fiscal year budget, the county determined that it could no longer provide the additional funds as many county-funded programs were experiencing reductions due the current economic crisis. Since the FIP model of family maintenance services is not a mandated approach to child welfare service delivery, the partner positions were eliminated in order to ensure that Child and Family Services can continue to meet its program mandates.

Differential Response in Stanislaus County has been another benchmark program of prevention and early intervention services in the state. Instead of waiting to intervene until the situation for the child(ren) has deteriorated, Differential Response provides for prevention and early intervention that is separate from the child protection system. Though referrals originate with calls to the child abuse hotline, the services families' receive at the Family Resource Center are voluntary and meet the needs as identified by the family. Because the threat of removing children is so stressful for families, engagement with the formal county system is less successful than with community partners who do not represent the same "authority" to the family. The Family Resource Centers and community partners, however, can be more successful in engaging families to accomplish positive change. Differential Response and its multidisciplinary team brings together Child and Family Services with Family Resource Centers and other community partners, providing a safety net for children at risk of abuse and neglect. The reciprocal communication and strong partnership between Child and Family Services and the community, is more effective in ensuring that children do not experience a recurrence of abuse or neglect. When risks are greater than originally assessed, the system is able to be more responsive than without this safety net.

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Differential Response also fell victim to budget related cuts. Services for children 0 to 5 years of age and their families have been funded for the past three years by the Children and Families Commission (First 5), while Promoting Safe and Stable Families (PSSF) federal funds has supported Differential Response for children 6 to 17 years of age. Due to the significant budget reductions experienced by Child and Family Services this fiscal year (2010/2011), PSSF funds were redirected internally to support treatment and parenting services as mandated by the court. As a result, funding was eliminated for Differential Response to this older child population. At that time it was determined that CBCAP funding would be designated to Hutton House for Differential Response services for youth ages 6-17 till the end of fiscal year 2010-2011. Because this has been such a high priority service in our community, our Child Abuse Prevention Counsel voted mid-year to use the \$200,000 as local match for the child welfare allocation thus enabling Differential Response to be reinstated for all ages effective July 1, 2011.

Team Decision Making (TDM) was another practice developed out of our Child Welfare Redesign / System Improvement efforts. Team Decision Making (TDM) is an evidenced based practice that reduces foster care entry and eliminates unnecessary placement moves for children in foster care. TDM is another example of how Stanislaus County has partnered with community and consumers to assist and protect children and families. With the TDM philosophy, Child and Family Services social workers no longer made decisions in a vacuum without the contribution of other community and agency partners, as well as the family. A facilitator brought together the important stakeholders to share in the determination of the best way to serve the family and ensure safety for the children. The agency's decision is more transparent to those who are involved with working with the family, and include those stakeholders in the decision making process. As a result, recurrence of maltreatment is reduced, unnecessary removal from home is prevented, reunification is timelier, placements are better suited to the needs of the child and thus more stable, and permanency is achieved. Team Decision Making (TDM) meetings require a neutral facilitator, thus two social workers have been dedicated to this function. Because of the profound cuts to Child and Family Services, these positions were eliminated and the staff redirected to case carrying positions whose social workers were subject to the Reduction in Force (RIF) for the 2010/2011 Fiscal Year. TDM is a recommended strategy on California's Program Improvement Plan (PIP) and has been a strategy included in Stanislaus County's System Improvement Plan (SIP) for the past 6 years; however, it is not mandated by legislation and therefore was eliminated in order to balance the Child and Family Services Division's budget.

In partnership with our community, services to youth in foster care and those aging out of the system had improved. Significant focus had been placed on connecting children to a life long connection so they exit care with a committed and caring adult who will support them as they move into independent adulthood. Stanislaus County has one of the few Family-Finding Models that use technology to search for relatives at the point that children enter foster care. A dedicated social worker position, the Permanency Specialist, ensured that relative searches and permanency work was completed for all children and youth. More children were able to reside with relatives and achieve permanency, thereby exiting foster care, as a result. This position was also eliminated in order to fill a case carrying position vacated due to Reductions in Force (RIF).

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Stanislaus Child and Family Services values the well-being of children and works diligently to keep children with their siblings while in care, to promote school attendance, to support psychotropic medication use and group home care only when necessary, and to ensure children of all ages are adopted or in a permanent home of guardianship.

Child and Family Services' participation in Redesign efforts created an agency and partner culture of continuously striving to improve. Much attention has been directed to our strengths as well as our opportunities for growth. When areas of concern are demonstrated, it is our custom to seek solutions and move toward growth through whatever change is necessary, rather than to make excuses and accept the status quo. Our many years of accreditation and system improvement efforts speak to our on-going dedication to improving the lives of children and families in our community.

Our opportunities for growth exist as well and are areas that we will seek to find solutions in coming years. Areas to potentially address in the System Improvement Plan (SIP) include improving non-recurrence of maltreatment, placement stability, permanency for older youth, and support for parents after reunification, foster parent recruitment and training, and services to youth exiting foster care. For example, many of our foster parents are most interested in adopting infants and very small children, while the majority of children in care are older children and teenagers. Though we have expanded and improved our training curriculum for foster parents to better prepare them for parenting an older child or teen, that still is a challenge we have not overcome. As a result, permanency through adoption for older children is more difficult to achieve. Stanislaus County has a number of Foster Family Agencies (FFA) certifying foster homes in our community, which ensures more placement opportunities but at a great cost of care. Recruitment of county homes has become more challenging as foster parents are reimbursed more and receive more intensive support when certified by an FFA. FFAs have the same challenges with placement matching and recruiting adoptive homes as the county. Another reduction that Child and Family Services had to make was the elimination of the foster parent recruiter trainer position in the 2010/2011 fiscal year in order to fill a RIF vacated case-carrying position. Although this position was extraordinarily valuable, it was not mandated.

Another challenge is how to support families after they exit the child welfare system so that their children do not re-enter foster care. We have developed team decision making practices to support this, but once families are no longer connected with the system formally, they may not have the support they need to face life's challenges in the months following reunification. Funding for aftercare services are not readily available and thus is designated as an unmet need.

As indicated previously, the biggest challenge facing Child and Family Services and Stanislaus County in these years is the economy and the dwindling budget. As the available financial resources diminish, the community safety net we have built and the complementary service delivery systems we have established has been eroded. It is anticipated that the child welfare system in our county will become increasingly dependent upon foster care placement to ensure child safety. Per Safe Measures, in July 2010, Stanislaus County served 379 children a month with pre-placement

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prevention services, such as Family Maintenance and Families in Partnership. At that same point, there were 232 children being served by Family Reunification Services. Throughout the last fiscal year, that has shifted significantly. In July 2011, there were only 260 children being served by pre-placement prevention services, where as 302 were in Family Reunification.⁶

The continuing poor economy and on-going housing crisis is projected to result in an approximate \$23 million dollar general fund deficit in the County for the 2010/2011 fiscal year. To address this challenge, the county reduced all staff salaries by 5 percent, and implemented 13 mandatory furlough days. In addition to this, all departments had to cut approximately 9% from their county general fund. The Child and Family Services Division budget is approximately 7% of the Community Services Agency (CSA) total budget, which totaled more than \$271 million in 2009/2010 fiscal year. The Community Services Agency budget includes programs, such as StanWORKs (CalWORKs and other Aid payments), Adult Protective Services, and In Home Supportive Services. Not all of CSA's programs require county general fund match and some have a maintenance of effort. A Maintenance of Effort is a minimum amount that a county must pay to operate a program. StanWORKs and Adult Protective Services are programs that have a legislated Maintenance of Effort and therefore cannot be reduced below the minimum required in County General Fund contribution; where as, Child and Family Services does not have a legislated Maintenance of Effort. This resulted in disproportionate general fund reductions to Child and Family Services. Because Realignment Revenues (sales tax revenues) have also been down, these funds are not available to supplement the difference in county general fund losses. The shortfall of more than \$600,000 in county general fund resulted in a more than \$6.2 million reduction in the overall Child and Family Services budget for the 2010/2011 fiscal year, or approximately 21%. This was in addition to cuts in the 2009/2010 fiscal year for a total of 29% across two years. During FY 2010/2011, Child and Family Services could not match the full basic allocation, thereby being unable to access the 100% federally funded augmentation dollars (approximately \$2,000,000) that are contingent upon fully expending the basic allocation. County instructions to departments facing reductions were to focus on mandated services and cut non-mandated programs first. In keeping with this, much of the divisions' system improvement efforts over the last several years have been severely cut and/or eliminated because they are not mandated services. In addition to services reductions, Child and Family Services division reduced staffing by 28.3% over the past two years, from 187 authorized and contracted staff two years ago to our present 134 authorized staff, representing a reduction of 53 staff. Further description of reductions can be found on page 59. This deficit in funding for Child and Family Services reduced our ability to meet our legal mandates as well as make adequate progress on outcome improvement.

The collaboration of our community and private partners, such as the Child Abuse Prevention Council, the Family Justice Center and Valley Recovery Resources has enabled Child and Family Services to reinstate many of the services and case carrying social worker positions previously eliminated, though the hiring and training process is not expected to be completed until mid-year 2011/2012.

Probation

The Stanislaus County Probation Department has three probation officers assigned to supervise minors with placement orders. A supervising probation officer supervises these officers, as well as three other officers assigned to the unit. The Department has 65 children with placement orders. The majority of these minors were receiving services from the Probation Department prior to the placement orders being given by the Court. The Intake probation officer first develops the case plan with the minor and his/her parents during the initial contact with the Probation Department. The placement officer, the minor, and his or her parents update the case plan as progress is made and/or needs are identified. The probation officers make every effort to place the minor within close proximity to Stanislaus County to increase the family's ability to participate in the minor's treatment and encourage the family to maintain frequent visits with the minor while he/she is in placement. The probation officer maintains monthly face-to-face contact with all minors in placement and frequently more often. When appropriate, the Probation Department utilizes transition options for minors with reunification plans. Such options include utilizing foster family agencies and non-relative family members as part of the transition plan. In any case, the probation officer continues to assist the family with identifying specialized services the child may need, as well as addressing any family issues that have not been resolved while the child was in placement. The family and minor are also encouraged to continue to address the issue(s) that led the child to being placed outside the family home. Although the minor and his family have access to many services while the minor is in placement, it is common for families to not engage in reunification services because the family is not mandated by the Court to do so. As a result, probation officers focus on permanency plans when reunification services are no longer feasible or terminated. The families have access to numerous services including parenting classes, mental health services, alcohol and drug treatment, public health nurses and family service specialists. These intense services are provided for the child and family to facilitate a successful reunification.

As it relates to placement stability, and based on a review and analysis of the promising practices, challenges and barriers identified in this report, it appears three major areas need to be addressed by the Probation Department:

- **Assessment**
Even though there are internal processes for determining proper placement of foster youth, these are more informal and based on anecdotal information or, often times, an officer's experience with similar youth. No validated placement assessment tool is used in assessing what the minor's needs are and how best to match them to an appropriate placement. It will be strongly recommended that the Probation Department pursue the development of a tool or evaluation of an existing tool to aid in the initial and subsequent assessment of placement youth.
- **Placement Matching**
As noted in the focus area section of this report, a review of the research literature indicates that placement stability is greatly affected by the type of placement (i.e. matching the minor's needs) and the number of placement settings experienced. Clearly without a validated assessment of a minor's needs, it is almost impossible to expect that a foster youth is being properly placed. Current placement matching is

done utilizing prior experience with similar youth and the results a particular foster agency, group home, etc may have had with those types of youth. Youth with specific treatment needs (i.e. sex offenders, arsonist, mental health, etc) continue to be placed accordingly; however, most probation placement youth come with a variety of issues and often do not have a singular treatment focus. With introduction of a validated assessment tool, it is recommended that placement decisions are directed, in part, by the assessment. Furthermore, it will be recommended that the Probation Department develop a method of measuring success rates for those foster/group homes used and track the data to create a baseline to compare against for future analysis of specific types or levels of facilities.

- **Family Engagement**

Although progress has been made in several areas previously identified in the past PQCR regarding family engagement, it appears from the current analysis that placement stability is being affected, in part, on the success of the Probation Department's ability to engage families throughout the youth's placement episode. Focus on parent reunification services and follow through on concurrent planning by utilizing relative and non-relative placements needs to be increased. It will be recommended that those families/youth still receiving reunification services be directed by the Court and held accountable by Probation to actively participate in the programs/services with focus on transitioning of the youth from group home/foster care back into the home with ancillary services to be provided to assist in making the transition successful (i.e. wraparound services, TBS, etc). Additionally, it was found from the interviews that concurrent planning was not regularly discussed in the context of a documented "plan". Case plan development will continue to include the youth and his/her parents/guardians with focus on creating documented concurrent plans should the reunification services fail. Placement findings and orders will always reflect the expected concurrent plan in those permanency cases.

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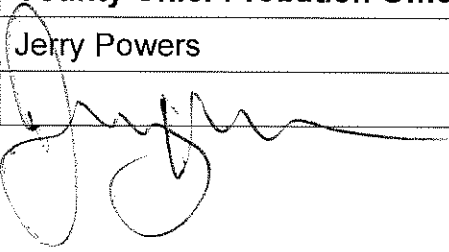
California's Child and Family Services Review System Improvement Plan

County:	Stanislaus
Responsible County Child Welfare Agency:	Community Services Agency Child & Family Services Division
Period of Plan:	09/28/2010 – 09/28/2013
Period of Outcomes Data:	Quarter ending: July 2011, Quarter Extract Q4 2010
Date Submitted:	Updated 2011

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Submitted by each agency for the children under its care

Submitted by:	County Child Welfare Agency Director (Lead Agency)
Name:	Christine Applegate
Signature:	
Submitted by:	County Chief Probation Officer
Name:	Jerry Powers
Signature:	

Child and Family Services Narrative

The information obtained through the PQCR and County Self Assessment processes led to the identification of outcomes and strategies for the System Improvement Plan (SIP). Activities that were targeted were practical given all the significant funding challenges experienced by the Child and Family Services Division.

Stanislaus County has experienced many unique challenges during the present fiscal climate. These are outlined in the Self Assessment discussion section.

The serious revenue shortfalls have led to the elimination or reduction of many 2007-2010 System Improvement Plan (SIP) strategies and other system improvement efforts. Many of the innovative practices that Stanislaus County's Child and Family Services program was known for have ended as a result. See the Attachments Section (page 59). The SIP strategies for the coming 3 year period are centered on training, practice change, or community partnerships that do not require funding. An update of the progress and/or changes to these strategies follows.

STRATEGIES UPDATE

No Recurrence of Maltreatment

Strategy 1.1: Management review of repeat maltreatment cases.

A review of all repeat maltreatment cases for children 0 to 2 years of age was completed by management. As the cases pre-dated our Structured Decision Making (SDM) implementation, accurate assessments of risk level were not available. None of the children were in danger and families were connected to community partners for services. However, it appeared that following the SDM risk assessment policy and promoting high and very high risk substantiated families to an open child welfare case in order to provide services, repeat maltreatment may improve.

Strategy 1.2: Motivational Interviewing for substance abusing families

Motivational Interviewing training was postponed during the first two years of the SIP to allow for the training and implementation of Structured Decision Making (SDM). Advanced SDM training will occur over several months during the 2011/2012 fiscal year, as will Signs of Safety training for staff.

Strategy 1.3: Joint path 2 visits with Family Resource Centers

Quarter 2, 2010 (4/1/11 to 6/30/2011) data from CWS/CMS using Business Objects indicates that joint visits for 0 to 5 year olds increased to 45.2%. Supervisors monitor for joint visits while reviewing cases, and with quarterly business objects reports. Joint visits have been incorporated into performance evaluations.

Strategy 2.1: Implement the Family Justice Center

The Family Justice Center was opened November 2010. The CAIRE center was co-located at the Family Justice Center to better serve victims of child abuse.

Strategy 2.2: Partner with the faith community

The Faith and private community collaborated to form a non-profit, Valley Recovery Resources, that helped restore clean and sober living services in the community through an anonymous donation used as local match for the CWS basic allocation. The Child Abuse Prevention Counsel used Children's Trust dollars as the local match to restore Differential Response services to older children/youth.

Strategy 2.3: Improve Social Worker awareness of community resources

Stanislaus County has a 211 information website for resource and referrals that is organized by the United Way. This is accessible to everyone. In addition, we meet with our Family Resource Center partners twice monthly for our Multidisciplinary team meetings in which information about resources, support groups, parenting classes is also exchanged. The Administrative Clerk II for Differential Response and system improvement in Child and Family Services is the conduit for e-mail communications between partners. We are continually brainstorming additional strategies to make sure that the information is available to all social workers and community partners.

Strategy 2.4: Child Abuse Prevention Counsel Outreach

CAPC chose to use the Children's Trust as the local match for the child welfare allocation in order to draw down funds for staffing so that Child Welfare funds can support sober living, differential response, etc. Their efforts and funds are used for these important prevention and early intervention community based services. No further outreach to other groups is planned at this time.

Timely Reunification

Strategy 3.1: Motivational Interviewing

Motivational Interviewing training was postponed during the first two years of the SIP to allow for the training and implementation of Structured Decision Making (SDM). Advanced SDM training will occur over several months during the 2011/2012 fiscal year, as will Signs of Safety training for staff.

Strategy 3.2: Icebreaker Meetings

Given the significant increases to caseloads and children entering foster care, we have not had the internal resources to move this strategy forward at this time.

Strategy 3.3: Enhance Visitation

Child and Family Services partnered with the Children's Crisis Center (CCC) to manage visitation between children and their parents/guardians during the reunification process. CCC facilitates more meaningful visits, with improved interactions and parenting strategies to ensure more successful visitation.

Strategy 3.4: Enhance linkages partnership with StanWORKs for reunification families

The Community Services Agency leadership made the decision to not pursue the use of CALWorks funds for reunification families. This strategy is eliminated.

Strategy 3.5: Partner with Faith Community

The Faith and private community collaborated to form a non-profit, Valley Recovery Resources, that helped restore clean and sober living services in the community through an anonymous donation used as local match for the CWS basic allocation.

Placement Stability

Strategy 4.1: Implement Wraparound Program

Stanislaus County implemented the Wraparound program in January 2011. The Steering Committee meets regularly to monitor the effectiveness of the program.

Strategy 4.2: Grief and Loss Training

The majority of child welfare staff was trained on Grief and Loss in 2010. The regional training academy will schedule an additional session for 2012 to educate newly hired social workers and FFA social workers on the impact of grief and loss on placement stability.

Strategy 4.3 Models of Orientation/training for youth entering care

Given the significant increases to caseloads and children entering foster care, we have not had the internal resources to move this strategy forward at this time.

Strategy 4.4: Team meetings for youth with 3 or more placement disruptions

Social workers do not routinely use the TDM process for every placement move as is the Family to Family model, but they do facilitate their own meetings as needed. The strategy will be removed as it is an informal practice but we do not have the resources to formalize TDM.

Strategy 4.5: Training on culture and placement

Due to the implementation of SDM during the 2010/2011 year and the Advanced SDM training, as well as Signs of Safety training, in 2011/2012, the academy training

resources are not able to accommodate this extra training objective. Social workers are mandated to attend annual cultural heritage events to improve cultural competency.

Strategy 4.6: Child social history form for FFAs

Through the changes of the past year and the elimination of the Team Decision Making (TDM) process, social workers are finding it more helpful to communicate directly with agencies rather than through a secondary party and the use of a form.

Strategy 4.7: Pre-placement visits

Due to staffing changes and reductions, this has not been the focus of efforts at this time.

Permanency through Adoption, Guardianship or Life Long Connection

Strategy 5.1: Joint Assessment Meetings (JAM)

Adoptions staff meet with other area adoption agencies at least quarterly to improve family finding practices and to identify homes for difficult to place children/children without a permanent home. The JAM process was determined to be ineffective and adoptions worker and social workers meet directly to ensure permanency.

Strategy 5.2: Increase Guardianship Awareness

Social workers are aware of Guardianship as an acceptable alternative and are using state/agency resources to educate families.

Strategy 6.1: Relative Placement Committee

Stanislaus County has a full time application specialist who completes through searches for relatives and other extended family members and inputs this information in a family finding / permanency database. All units were trained in the use of the Permanency Database and the importance of entering results of home evaluations for future use. The Family Finder staff member was relocated from the Information and Technology section of the building to an office amongst social workers to ensure great accessibility.

Probation Narrative

The Probation Department collaborated with Child Welfare Services (CWS), community stakeholders, and internal staff to conduct the Self Improvement Plan (SIP). This included participation in outcomes meetings with CWS staff and focus groups with staff and community stakeholders. This process started in the fall of 2009, when the Probation Department participated in the Peer Quality Case Review (PQCR) and then the County Self Assessment (CSA) in the spring of 2010.

Placement Stability has been identified as the Probation Department's focus area due to the number of placement changes experienced by children placed through the Probation Department. A review of the research literature indicates that placement stability is greatly affected by the type of placement (i.e. matching the minor's needs) and the number of placement settings experienced. Based on the findings of the PQCR and CSA, there is a need to improve upon the methods in which minors are being properly initially and, when applicable, subsequently placed.

During the PQCR and CSA, it was evident that the probation cases indicated a theme of utilizing case management and documentation of monthly visits, contact with minors and follow up with mental health and behavioral health professionals. Probation officers regularly reviewed case plans with youth and received their feedback. Additionally, low case loads allowed officers to maintain contact with group homes and provide them with updated health and education information. However, it was also found in the areas of youth assessment and placement matching that a validated assessment tool was not utilized in making initial or subsequent placement decisions. Furthermore, even though case documentation may be up-to-date, the anecdotal information or experiences probation officers have with minors is sometimes lost when cases are transferred between officers unless they are clearly noted in the file.

Three major areas were identified as needing to be addressed by the Probation Department:

- **Assessment**

Even though there are internal processes for determining proper placement of foster youth, these are more informal and based on anecdotal information or, often times, an officer's experience with similar youth. While the Probation Department utilizes a validated tool for assessing each minor's risk and needs, placement officers do not have access to an assessment tool for determining the most appropriate placement option for the minor. The Probation Department will pursue the development of a tool or evaluation of an existing tool to aid in the initial and subsequent assessment of placement youth.

- **Placement Matching**

A review of the research literature indicates that placement stability is greatly affected by the type of placement (i.e. matching the minor's needs) and the number of placement settings experienced. Clearly without a validated assessment of a minor's needs, it is almost impossible to expect that a foster youth is being properly placed. Current placement matching is done utilizing prior experience with similar

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youth and the results a particular foster agency, group home, etc may have had with those types of youth. Youth with specific treatment needs (i.e. sex offenders, arsonist, mental health, etc) continue to be placed accordingly; however, most probation placement youth come with a variety of issues and often do not have singular treatment milieu. With the introduction of a validated assessment tool, it is recommended that placement decisions be directed, in part, by the assessment. Furthermore, it was recommended that the Probation Department develop a method of measuring success rates for currently utilized foster/group homes and to track the data to create a baseline to compare against for future analysis of specific types or levels of facilities.

- Family Engagement

The PQCR process identified that placement stability is being affected, in part, on the success of the Probation Department's ability to engage families throughout the youth's placement episode. Focus on parent reunification services and follow-through on concurrent planning by utilizing relative and non-relative placements needs to be increased. As a result, those families/youth still receiving reunification services will be directed by the Court and held accountable by Probation to actively participate in the programs/services with focus on transitioning of the youth from group home/foster care back into the home with ancillary services to be provided to assist in making the transition successful (i.e. wraparound services, TBS, etc). Additionally, it was found from the interviews that concurrent planning was not regularly discussed in the context of a documented "plan". Case plan development will ensure the inclusion of the youth and his/her parents/guardians with focus on creating documented concurrent plans should the reunification services fail. Placement findings and orders will always reflect the expected concurrent plan in those permanency cases.

One activity currently in place that will impact the outcomes is the use of CWSOIP funds to support family engagement. With the 2010/2011 CSWSOIP allocation, Probation will provide parents and guardians with the financial support necessary to visit placed minors in California locations of significant distance from Stanislaus County. This will also include the families of minors currently placed in Pennsylvania, Arizona, and Nevada. This will also support meeting the goals of each minor's reunification plan.

Another potential impact on the outcomes is the apparent lack of placement matching tools available for utilization. Probation will be seeking technical assistance to meet this need.

**CHILD & FAMILY SERVICES/PROBATION
SIP MATRIX**

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Outcome/Systemic Factor: NO RECURRENCE OF MALTREATMENT – CHILD AND FAMILY SERVICES									
County's Current Performance: According to the Quarter 2, 2009 Outcome and Accountability Report (review dates 7/1/08 – 12/31/08), 92.0% of children with a substantiated incident of abuse or neglect did not have a subsequent substantiated allegation within the following six months. The rate of no recurrence had improved as of Quarter 4 2009 (1/1/09 – 12/31/09) to 94.2 percent, and to 96.6 percent as of Quarter 1 2011 (4/1/2010 – 9/30/2010) at the National Standard (94.6%) for this measure. ¹ The overall trend has been improving over the past several years. Analysis of Quarter 4 2009 data showed that recurrence is worse for those children who are victims of neglect (93.9%) and physical abuse (93.8%), although 88% of the allegations were for neglect and only 3% were for physical abuse. For those children most vulnerable, that is 0 to 5 years of age; children 1-2 years of age did not have repeat maltreatment in 90.2% (120 of the 133) of the cases. The children under 1 and those between 3 and 5 years did not have repeat maltreatment 95% of the time, thereby meeting the National Standard. For those 1 to 2 year olds, all repeat occurrences were the result of neglect. Children between 6 and 10 yrs (93.9%) and 11-15 yrs (94.1%) had better outcomes than the smaller children but still did not meet the goal of 94.6%. All other age groups are meeting the National Standard for this measure. Update: Per the Quarter 1 2011 Extract: children 1 – 2 years of age did not experience a recurrence of maltreatment 96.6%.¹									
Improvement Goal 1.0 Increase the percentage of children ages 1 – 2 years of age who do not experience a recurrence of neglect from 90.2% to 94.6%, per Center for Social Services Research, UC Berkeley extract									
Strategy 1.1 Management Review of repeat maltreatment cases. COMPLETED		<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A		Strategy Rationale Children 1 – 2 years of age are most likely of the 0 – 5 age group to experience repeat maltreatment. Since services for children 0 to 5 through Differential Response continue, some of the community safety net remains in place and can support children at home.		Assigned to			
Milestone		Timeframe		November 2010 DONE		Data Analyst/ Researcher			
				January 2011 DONE		Janette Newberry, Mgr III System Improvement & Adoptions			
				March 2011 DONE		Management Team			
				May 2011 DONE		Management Team			
				1.1.1 Obtain case lists for children 1 – 2 years that are victims of repeat maltreatment.		1.1.2 Complete case analysis of specific cases to determine factors that contributed to the repeat maltreatment.		1.1.3 Make recommendations to leadership team regarding training, policies or service gaps that might have prevented these occurrences.	

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	schedule recommended training		Quarterly Dec 2011 - 2013		Janette Newberry, Mgr III System Improvement & Adoptions
	1.1.5 Monitor outcomes on repeat maltreatment quarterly, including case reading of high or very high risk SDM cases that are not opened for on-going services.				
Milestone	Strategy 1. 2 Use Motivational Interviewing Techniques to engage families in services and substance abuse treatment. Supervisors will monitor through case supervision.		<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	Strategy Rationale Motivational Interviewing is an evidenced based practice that has been proven successful in engaging even substance abusing individuals. As the vast majority of our families have substance abuse issues, this skill will improve our engagement. Given that the availability of substance abuse services has declined, and sober living is no longer a service funded by CFS, the successful engagement of families is critical. Since Differential Response to children 0 to 5 and their families continues due to the Children and Families Commission funding, Family Resource Centers will continue to be involved in preventative services. Update 10/2011: Due to funding changes, sober living and treatment services have been reinstated.	
	1.2.1 Train Social workers, Public Health Nurses and Family Resource Center outreach workers in Motivational Interviewing	Timeframe	March 2014 June 2013	Assigned to	Behavioral Health & Recovery Services (BHRS) Regional Training Academy Adoption Supervisor/Staff Developer System Improvement Manager System Improvement Manager
	1.2.2 Update/create agency policies that reflect the value and practice of motivational interviewing.		May 2014 July 2013		Supervisors
	1.2.3 Provide Supervisor support to staff for use of these skills.		Ongoing September 2013		
	1.2.4 New: Evaluate the effectiveness of the training by attendance records and social worker satisfaction survey.		August 2013		System Improvement Manager
Strategy 1. 3			<input type="checkbox"/> CAPIT	Strategy Rationale	

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For those referrals regarding 0 to 5 year olds, whose risk and safety assessment indicates a 10 day referral is appropriate, increase the percentage that are referred for a Path 2 joint response with Family Resource Centers from 23% to 40%,(business objects data extract from CWS/CMS).	COMPLETED / GOAL MET	<input type="checkbox"/>	CBCAP	Differential Response has been demonstrated to be an evidence based practice and recurrence of maltreatment has declined since implementation. In 2009/2010, joint Path 2 visits declined to 23% from a previous 52-65% range for 0-5 year olds. Examination of data and report from FRCs indicates that some social workers conduct joint visits more than half the time, while some do so significantly less or not at all. While DR with Family Resource Centers is stopped for 6-17 year olds due to budget constraints in FY 2010/2011, Prop 10/Children and Families Commission continued to fund DR for 0-5 years. Since 1-2 year olds experiencing general neglect had the greatest chance of repeat neglect, this is a targeted focus of our SIP. Update: Quarter 2, 2011 (4/1/11 to 6/30/2011) data from CWS/CMS using Business Objects indicates that joint visits for 0 to 5 year olds increased to 45.2%.
		<input type="checkbox"/>	PSSF	
		X	N/A	
Milestone	Timeframe	October 2010 COMPLETED	Assigned to Emergency Response Supervisors and Manager Emergency Response Supervisors and Manager Emergency Response Supervisors System Improvement Manager Data Analyst/Researcher	
		November 2010 COMPLETED		
		Ongoing		
		Quarterly through 2013		
Strategy 1.4 NEW Use the Structured Decision Making (SDM) system to assess safety and risk and guide decision-making. SDM Tools will be completed at 90% by September 2013.		<input type="checkbox"/>	CAPIT	Strategy Rationale Stanislaus County Child and Family Services (CFS) implemented the Comprehensive Assessment Tool (CAT) in 2005 for assessing safety and risk. Despite repeated trainings on critical thinking, CFS felt that a tool that
		<input type="checkbox"/>	CBCAP	
		<input type="checkbox"/>	PSSF	
		X	N/A	

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					promotes better consistency in decision making was needed. After review of the Structured Decision Making (SDM) tools, it was determined that SDM would be a better safety and risk assessment system to guide decision making. Training of all staff occurred in March 2011 and implementation began April 2011.
1.4.1 Train new staff in SDM and all staff in Advanced SDM.	Timeframe	March 2012		Assigned to	Training Academy System Improvement Manager
		Monthly through September 2013			Data Analyst/Researcher System Improvement Manager CFS Supervisors
1.4.2 Monitor implementation of SDM via case reading and Safe Measures reports to ensure that safety and risk is driving our decision making.					

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Improvement Goal 2.0 Increase the percentage of children between the ages of 6 to 10 years and 11 to 15 years who do not experience a recurrence of abuse or neglect from 93.9% and 94.1%, respectively, to 94.6%. ¹					
Strategy 2.1 Implement the Family Justice Center in Stanislaus County to collaboratively address family violence, including domestic abuse, physical and sexual abuse. COMPLETED / FJC OPENED NOVEMBER 2010		<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	Strategy Rationale More cases of child abuse have collateral issues of domestic violence which impact the safety and wellbeing of children. Stanislaus County has been in process of implementing a Family Justice Center which will bring together services to address family violence in one central location.		
Milestone	2.1.1 Partner with the District Attorneys Office and other partners to establish policies and procedures for the Family Justice Center	2011 COMPLETED	Assigned to	Assistant Director, Emergency Response Manager and CAIRE Center Supervisor	
	2.1.2 Co-locate CAIRE Center at the Family Justice Center	2011 COMPLETED		Assistant Director, Emergency Response Manager and CAIRE Center Supervisor	
Strategy 2.2 Partner with Faith-based and other Community partners to provide supportive services to children and families at risk of abuse and neglect, e.g. Respite (Children's Crisis Center), etc. Due to confidentiality, information will be provided to families regarding available services and supports so that they can self-select those which will help their family. MODIFIED: The Faith and private community collaborated to form a non-profit, Valley Recovery Resources, that helped restore clean and sober living services in the community through an anonymous donation used as local match for the CWS basic allocation. The Child Abuse Prevention Counsel used Children's Trust dollars as the local match.		<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	Strategy Rationale Many formal services have been cut by Child and Family Services due to extraordinary budget deficits. Services are limited or unavailable for children with extraordinary medical, developmental and behavioral needs, teens, etc. Respite services at Children's Crisis Center (CBCAP) for children ages 6 – 9 are insufficient to meet community need. Services to runaway teens are increasingly in demand and are presently inadequate to serve the need. Funding for these services is at risk. Because CFS cannot afford to pay for more formal supports for families, outreach to the Faith and other community partners to coordinate efforts to support families may put into place the informal supports that help families be successful. (CBCAP funding is not targeted for faith partners, but rather Respite services. Faith partner collaboration is not a funded activity but rather a collaboration effort.)		
2.2.1 Outreach to Faith-based and other	2.2.1 Outreach to Faith-based and other	December 2010 COMPLETED		System Improvement Manager	

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	community organizations and churches.	<p>2.2.2 Facilitate Meeting with Faith and other Community partners to determine available services and supports that they can provide.</p> <p>2.2.3 Create a Directory of Faith and other Community Partners and the resources/supports that they can provide to families.</p> <p>2.2.4 Communicate regularly with Faith and other community members to facilitate partnership.</p>	<p>February 2011 COMPLETED</p> <p>March 2011 September 2012</p> <p>May 2011 Ongoing through Sept 2013</p>	System Improvement Manager
<p>Strategy 2.3 Improve social worker and community partner awareness of supportive services in the community, such as parenting, support groups, AA/NA, food closets, respite services, latchkey, etc.</p>		<p>Strategy Rationale Services in Stanislaus County are limited primarily due to budget cuts and financial stresses. Many services that exist are limited in capacity while others are unknown to the child welfare agency and therefore not formally referred by CFS, such as parenting classes, support groups, food closets, respite services, latchkey, etc. Because community based services are constantly changing, social workers are not always aware of these services. Family Resource Centers, faith community members and other public or private agencies may be aware of services that we are not tapping into for our CFS families.</p>	<p><input type="checkbox"/> CAPIT</p> <p><input type="checkbox"/> CBCAP</p> <p><input type="checkbox"/> PSSF</p> <p><input checked="" type="checkbox"/> N/A</p>	System Improvement Manager Director and Assistant Director
<p>Milestone</p>	<p>2.3.1 Outreach to Family Resource Centers, United Way, Health Services Agency and other community partners to gather resource information and compile for social workers.</p> <p>2.3.2 Generate/update local databases and information for social workers and community partners to distribute to families Utilize United Ways' 211 Resource and Referral website.</p> <p>2.3.3 Update Information Quarterly</p>	<p>Timeframe</p>	<p>November 2010 Monthly through 2013</p> <p>February 2011 COMPLETED</p> <p>May 2011</p>	<p>System Improvement Manager CFS Supervisors</p> <p>System Improvement Manager CFS Supervisors</p> <p>System Improvement Manager CFS Supervisors</p>

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2.3.4 Train all new staff, on the United Ways 211 site for resource and referral for families.		Within 30 days of hire for new social workers, on-going through Sep 2013.	Supervisors									
2.3.5 New: Survey staff annually about resource availability and awareness		June 2012 & 2013	System Improvement Manager									
Strategy 2.4 Child Abuse Prevention Committee (CAPC) will outreach to community regarding abuse and neglect prevention, including Differential Response for 6 – 17 year olds, CAPC program expansion outreach, relative-caregiver services & supports, and homeless teens. Update: CAPC chose the use of Children’s Trust as the local match for the child welfare allocation in order to draw down funds for staffing so that child welfare funds can support sober living, differential response, etc. Their efforts and funds are used for these important prevention and early intervention community based services.		<table><tr><td><input type="checkbox"/></td><td>CAPIT</td></tr><tr><td><input type="checkbox"/></td><td>CBCAP</td></tr><tr><td><input type="checkbox"/></td><td>PSSF</td></tr><tr><td>X</td><td>N/A</td></tr></table>	<input type="checkbox"/>	CAPIT	<input type="checkbox"/>	CBCAP	<input type="checkbox"/>	PSSF	X	N/A	Strategy Rationale Differential Response to 6 – 17 year olds with the Family Resource Centers has been eliminated, with the exception of services to runaway teens who are served through December 2010. These services, though present at Hutton House, are inadequate to meet local needs (CBCAP). Additionally, relatives care for children without juvenile court involvement. Services to these caregivers, predominantly grandparents, are insufficient to meet community needs. Leadership outreach and prevention campaign to new targeted communities regarding abuse and neglect prevention.	
<input type="checkbox"/>	CAPIT											
<input type="checkbox"/>	CBCAP											
<input type="checkbox"/>	PSSF											
X	N/A											
Milestone	Timeframe	Assigned to										
2.4.1 Child Abuse Prevention Committee (CAPC) will identify areas of need to target for outreach efforts, e.g. Ethnic groups	October 2010 COMPLETED	Assistant Director, CAPC Coordinator and CAPC committee										
2.4.2 Agency leadership and CAPC leadership will contact and meet with various community groups to develop relationship and basis for education	February 2014	Assistant Director, CAPC Coordinator and CAPC committee										
2.4.3 Provide training and Education as determined by the Partnership.	FY 2011/12	Assistant Director, CAPC Coordinator and CAPC committee										

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<p>Describe any additional systemic factors needing to be addressed that support the improvement plan goals.</p> <p>The elimination of important services and supports due to budget challenges in Child and Family Services may hinder continued progress toward meeting goals in this area. The elimination of programs such as Families in Partnership, Differential Response (for 6-17 year olds), sober living, and other best practices such as Team Decision Making (TDM) meetings will seriously undermine the safety net for children.</p> <p>Update 9/2011: Due to the partnership with the private and faith community and the anonymous donation of private funds to use as the county match, Child and Family Services is able to reinstate some positions and some services, including sober living and Differential Response for 6 – 17 year olds. TDM meetings and the Families in Partnership strategy will not resume, though we are in the process of adding interdisciplinary staff, such as nurses and substance abuse counselors to our team.</p>	<p>Describe educational/training needs (including technical assistance) to achieve the improvement goals.</p> <p>Training on Motivational Interviewing, an evidence based practice, will be an important skill set for social workers and Family Resource Centers during these times of shrinking resources. The elimination of substance abuse counselors as part of the team has many social workers feeling powerless to positively impact families. By learning additional skills to motivate families, they may become less reliant on substance abuse experts for successfully engaging substance abusing families.</p> <p>Update 9/2011: The implementation of Structured Decision Making (SDM) as well as Advanced SDM training and Signs of Safety, have replaced Motivational Interviewing at this time.</p>	<p>Identify roles of the other partners in achieving the improvement goals.</p> <p>The Regional Training Academy will provide the training. The Child Abuse Prevention Counsel will partner with Child and Family Services on community education. They are already doing so through various efforts, such as the Child Abuse Calendar and Shaken Baby Syndrome campaign but will continue to establish more efforts for community awareness and education. The Child and Family Services Division will partner with faith based organizations and other community groups to provide support for children and families at risk of child abuse and neglect.</p>	<p>Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.</p> <p>N/A</p>
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Outcome/Systemic Factor: TIMELY REUNIFICATION – CHILD AND FAMILY SERVICES				
County's Current Performance: According to the Quarter 4 2009 Extract Outcomes Summary, of those children that exited to Reunification between 1/1/09 to 12/31/09, 69.2% did so within 12 months of entering foster care, short of the National Standard of 75.2%. The Quarter 4 2010 Extract indicates that our performance had improved to 72.2%. In 2009, Children between the ages of 0 and 5 years reunified within 12 months 78% of the time, thus meeting the outcome. For children 11-15 years, 67% reunified with 12 months, where as 6 – 10 year olds only reunified with 12 months 57% of the time. There were 7 children reunified between the ages of 16 and 17 years, of whom on 43% (3 children) reunified within 12 months. An additional 7 children needed to reunify in less than 12 months in order to meet the standard. During the development of the SIP, those children who entered foster care for the first time, 20.4% exited to reunification within 12 months, less than half of the National Standard of 48.4%. The Outcome System Summary from October 2011 (Quarter 1 extract) shows that our performance has improved to 40%, better than the 30.5% goal set and still below the National Standard of 48.4%. ¹ Stanislaus must double the number of first entries that reunify within 12 months to meet this measure. Stanislaus County's 2009 median time to reunification is 9.3 months, greater than the National Standard of 5.4 months. In 2010, the median time to reunification dropped to 8.3 months. Children re-entered foster care 8.7% of the time in 2009, which is better than the National Standard of 9.9%. However, our re-entry rate declined to 10.4% in 2010.				
Improvement Goal 3.0 Increase the number of children who enter foster care for the first time, who reunify within 12 months from 20.3% to 30.5%. Update: The Outcome System Summary from October 2011 (Quarter 1 extract) shows that our performance has improved to 40%, better than the 30.5% goal set and still below the National Standard of 48.4%.				
Strategy 3.1 Use Motivational Interviewing Techniques to engage families in services and substance abuse treatment.	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	Strategy Rationale Motivational Interviewing is an evidenced based practice that has been proven successful in engaging even substance abusing individuals. As the vast majority of our families have substance abuse issues, this will improve our engagement. Given that the availability of substance abuse services has declined, and sober living is no longer a service funded by CFS, the successful engagement of families is critical.		
		Assigned to Regional Training Academy Adoption Supervisor/Staff Developer System Improvement Manager System Improvement Manager		
Milestone	3.1.1 Train Social workers, Public Health Nurses and Family Resource Center outreach workers in Motivational Interviewing	Timeframe March 2011 June 2013		
	3.1.2 Update/create agency policies that reflect the value and practice of motivational interviewing.	May 2014 July 2013		

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	3.1.3 Provide Supervisor support to staff for use of these skills.		Ongoing September 2013		Supervisors
	3.1.4 New: Evaluate the effectiveness of the training by attendance records and social worker satisfaction survey.		August 2013		System Improvement Manager
Milestone	<p>Strategy 3.2 Implement the practice of "Icebreaker Meetings" to assist birth parents and foster parents to develop a cooperative relationship</p> <p>Update: Given the significant increases to caseloads and children entering foster care, we have not had the internal resources to move this strategy forward at this time. We are in the process of hiring staff and attempting to restore services to families. This will be reviewed with the goal of implantation by June 2013.</p>	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	Strategy Rationale Parents are more successful in reunification when they have a positive relationship with the caregiver of their children. When children are placed in a foster home or FFA home, the parents do not know the caregiver and often fear for the wellbeing of their children and that the caregiver just wants to take the child away. During the Icebreaker meeting the birth parent and caregiver exchange information about the child, such as bedtime routine, eating preferences, routines, and preferences. Icebreakers also work to stabilize placements and prevent unnecessary disruption. Both county and FFA social workers/supervisors recommended this strategy.		
	3.2.1 Update current Icebreaker Policy	November-2010 March 2013	Assigned to		
	3.2.2 Train social workers and FFAs on Ice Breaker philosophy and procedure	January-2011 April 2013			
	3.2.3 Social workers from CSA or FFA will implement Icebreaker meetings between the birth parent and substitute caregiver.	March-2011 June 2013			
	3.2.4 Monitor the effectiveness of Icebreaker meetings with surveys of parents, care providers and social workers.	September 2013			System Improvement Manager
Strategy 3.3 Enhance Visitation between birth parents/guardians and children		<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	Strategy Rationale Research indicates that one of the most important factors in successful reunification is visitation between parent and child. The Court is presently ordering visitation weekly for every child, regardless of parents' participation in services. This poses		

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						challenges due to limited resources to support visitation, foster parent schedules, social worker caseloads, etc. During SIP strategy workgroups many FFAs indicated that this was an area that they can assist. Update: the Children's Crisis Center approached Stanislaus about partnering to provide this service here at the agency where visits are already taking place. This addition offered the greatest measure of strategy implementation success as the least amount of change to current processes was needed.
Milestone	Timeframe	3.3.1 Participate with the Court in Visitation subcommittee	Ongoing COMPLETED	Assigned to		Manager Court/FR Supervisors
		3.3.2 Partner with FFAs, Faith Community, Friends Outside, United Way Children's Crisis Center to support more meaningful visitation between parents and children during the reunification process. Other partners will be included in current committee-established practice as willing/able to engage.	November 2010 COMPLETED			Manager Supervisors FFAs
		3.3.3 Update policies and procedures on visitation	January 2011 COMPLETED			Manager Supervisors
		3.3.4 Train Social workers and FFAs on Purposeful Visitation-Eliminated as Children's Crisis Center is facilitating meaningful visitation	July 2011 DELETED			Regional Training Academy
		3.3.5 New: Survey parents at least annually regarding their satisfaction with visitation. Review surveys and recommendations for modification.	June 2012 & June 2013			Children's Crisis Center System Improvement Manager

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Strategy 3.4 Enhance linkages partnership with StanWORKs for reunification families.		Strategy Rationale Per AB429, Welfare to Work families may be eligible for services funded through CalWORKs. This was not previously pursued for families also involved with Child and Family Services. Due to the elimination of sober living and other services because of Child and Family Services funding, it is necessary to reconsider this as a potential strategy.	
Milestone	Timeframe	<input type="checkbox"/> CAPIT	December 2010 DELETED
		<input type="checkbox"/> CBCAP	
		<input type="checkbox"/> PSSF	
		<input type="checkbox"/> N/A	
Milestone	3.4.1 Review AB429 regulations to determine how to provide otherwise unavailable services through Welfare to Work (WTW) funding.	Assigned to	
	3.4.2 Review policies and procedures from other linkages counties.		
	3.4.3 Meet with StanWORKs to discuss AB429 and how to link WTW families to services funded through Linkages.		
Strategy 3.5 Partner with the faith and other community partners to provide supportive services to children & families during and after the reunification process. MODIFIED: The Faith and private community collaborated to form a non-profit, Valley Recovery Resources, that helped restore clean and sober living services in the community through an anonymous donation used as local match for the CWS basic allocation. The faith community is supporting families through this avenue of sober living and other supports.		Strategy Rationale Many formal services have been cut by Child and Family Services due to extraordinary budget deficits. Because CFS cannot afford to pay for more formal supports for families, outreach to the Faith and other community partners to coordinate efforts to support families may put into place the informal supports that help families be successful. Due to confidentiality, service options will be provided to families for them to self-select which partners to engage in supporting their own family.	
Milestone	3.5.1 Outreach to Faith-based and other community partners.	December 2010 & ongoing COMPLETED	System Improvement Manager

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	3.5.2 Facilitate meeting with Faith and other community partners to determine available services and supports they can provide. Update: CFS Director & Asst Director participate in coalition.	March 2011 COMPLETED	System Improvement Manager
	3.5.3 Create a Directory of Faith and other community partners and the resources/supports that they can provide to families. Provide this information to families so they can self-select which services will benefit them.	May 2011	System Improvement Manager
	3.5.4 Create policies & procedures for staff.	May 2011	System Improvement Manager
	3.5.5 Communicate regularly with Faith and community partners to facilitate partnership	May 2011 & on-going	System Improvement Manager

Describe any additional systemic factors needing to be addressed that support the improvement plan goals.

Staffing reductions and funding reductions may result in significant challenge in the timely reunification of families. Services, such as sober living and SafeCourt (Dependency Drug Court) have enabled Child and Family Services to return children whom are at high risk to their parents in a supervised and safe living situation while participating in treatment. Without these services, in combination with significant housing issues in the county, children may be delayed in returning home while parents make significant progress in services and obtain suitable housing.

Update 9/2011: While services are in large being restored due to budget improvements, our caseload levels remain high, eg. 39 children in Family Reunification per social worker. Additionally, a change in the court has resulted in court orders for increased visitation.

Describe educational/training needs (including technical assistance) to achieve the improvement goals.

Purposeful visitation training provided by the Regional Training Academy

Identify roles of the other partners in achieving the improvement goals.

FFA social workers are an important part of achieving the reunification goals as so many children/youth are placed in their agency's homes. As developed through the Visitation Subcommittee, visitation is conducted at the agency until such time that it is safe to occur in the community. Children's Crisis Center receives grant money to facilitate successful visitation between parents and children in order to prevent further abuse/neglect. As partners with child welfare, they start and facilitate visits at the agency to mentor parents in meaningful visits. FFA social

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workers are involved in visitation as determined on a case by case basis.

Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.

N/A

Outcome/Systemic Factor: PLACEMENT STABILITY – CHILD AND FAMILY SERVICES						
County's Current Performance: According to the Quarter 4 2009 Outcomes Report, Stanislaus County Child and Family Services was meeting the National Standard (65.4%) for placement stability for children in care for 12 to 24 months, with 67.7% of children having 2 or fewer placements. Update: Our performance on this measure per the Quarter 1 2011 Extract declined to 63.9%.¹ When evaluated by age, children between 11 and 15 years are not meeting the goal with only 33% experiencing minimal moves. Only 30.4% of youth between 16 – 17 years of age experience 2 or fewer moves. For children in foster care from 8 days to 12 months we are falling just short of the National Standard (86.0%) with 85.9% of our children having 2 or fewer placements. ¹ Children under 11 years of age are meeting this standard, but only 78.2% of 11 – 15 year olds and 76.2% of 16-17 year olds have 2 or fewer placements. For those children who have been in care 24 months or more, only 25.4% of children have been in 2 or fewer placements during their entire stay in foster care. That is significantly short of the National Standard (41.8%). Our performance is poorest with respect to children ages 11 – 15 years, for whom only 11.5% have two or fewer placements. Children in this age range are most stable when placed with relatives, with 33% experiencing stability. In order to meet the National Standard on this measure, 25 more children would need to experience greater stability in foster care placements.						
Improvement Goal 4.0 Increase the percentage of children in foster care for 24 months or more who have two or fewer placements from 29.8% to 35%. Update: CFS has fewer children in group home placement in favor of wraparound services, but the impact of placement changes cannot be ascertained at this early juncture.						
Milestone	Strategy 4.1 Implement Wraparound Program		Strategy Rationale Wraparound has demonstrated promising research evidence for improving placement stability. Our self assessment and PQCR both indicated challenges with stabilizing placements due to behavior problems. Stanislaus has not had a wraparound program in place but is in the process of implementation.		Assigned to Manager – CSA Permanency Unit Manager – CSA Permanency Unit & Contract Division Wraparound Steering Committee Manager – CSA Permanency Unit Wraparound Steering Committee	
	COMPLETED: Stanislaus County's wraparound program was implemented in January 2011.					
	4.1.1 Release Request for Proposal (RFP)		August 2010 COMPLETED			
	4.1.2 Implement Contracts with service providers		January 2011 COMPLETED			
	4.1.3 Train CFS & Wraparound providers		March 2011 COMPLETED			
4.1.4 The Wraparound committee will monitor the effectiveness of the services at the regular meetings and recommend changes to policies		On-going through 2013				

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and procedures as needed.					
Strategy 4. 2 Train new social workers and FFA staff on Grief and Loss through new social worker academy or separate training. The majority of social workers attended grief and loss in 2010. Update: New social workers that we are in the process of hiring and FFA social workers will be provided with grief and loss training.	Strategy Rationale Our PQCR process indicated that social workers are not consistently addressing issues of grief and loss with their children/youth in placement. It is assumed to be the mental health clinicians' role, and is thus not addressed when a child is stabilized enough to be closed to mental health.	<input type="checkbox"/> CAPIT	Assigned to	Regional Training Academy	
		<input type="checkbox"/> CBCAP			
		<input type="checkbox"/> PSSF			
		X N/A			
Milestone	Timeframe	July 2010 June 2012	Assigned to	Regional Training Academy	
		October 2010 COMPLETED			
		July 2014 June 2012			
Strategy 4. 3 Explore models of orientation/training for youth entering foster care to facilitate their adjustment / transition into care. Update: Due to the significant cuts in staffing, ILP interviewers and corresponding caseload increases, and the preparation for AB12 implementation, this strategy was not implemented during this past year. It will be discussed again with the foster youth through Youth Advisory Council to determine next steps.	Strategy Rationale Our foster youth report confusion about foster care and what to expect. This contributes to their instability in care and tendency to runaway. Youth recommended that some type of training and orientation for youth entering care be explored and implemented. Expand discussion.	<input type="checkbox"/> CAPIT	Assigned to	Youth Advisory Council	
		<input type="checkbox"/> CBCAP			
		<input type="checkbox"/> PSSF			
		X N/A			
Milestone	Timeframe	November 2010 March 2013	Assigned to	Youth Advisory Council	
		March 2014 June 2013			
		June 2014 September 2013			
Strategy 4. 3.1 Research models of youth orientation to foster care	Strategy Rationale Our foster youth report confusion about foster care and what to expect. This contributes to their instability in care and tendency to runaway. Youth recommended that some type of training and orientation for youth entering care be explored and implemented. Expand discussion.	<input type="checkbox"/> CAPIT	Assigned to	Youth Advisory Council	
		<input type="checkbox"/> CBCAP			
		<input type="checkbox"/> PSSF			
		X N/A			
Milestone	Timeframe	November 2010 March 2013	Assigned to	Youth Advisory Council	
		March 2014 June 2013			
		June 2014 September 2013			
Strategy 4.3.2 Review models and make recommendations for implementation including resourcing the effort	Strategy Rationale Our foster youth report confusion about foster care and what to expect. This contributes to their instability in care and tendency to runaway. Youth recommended that some type of training and orientation for youth entering care be explored and implemented. Expand discussion.	<input type="checkbox"/> CAPIT	Assigned to	Youth Advisory Council	
		<input type="checkbox"/> CBCAP			
		<input type="checkbox"/> PSSF			
		X N/A			
Milestone	Timeframe	November 2010 March 2013	Assigned to	Youth Advisory Council	
		March 2014 June 2013			
		June 2014 September 2013			
Strategy 4.3.3 Test recommended model contingent upon	Strategy Rationale Our foster youth report confusion about foster care and what to expect. This contributes to their instability in care and tendency to runaway. Youth recommended that some type of training and orientation for youth entering care be explored and implemented. Expand discussion.	<input type="checkbox"/> CAPIT	Assigned to	Youth Advisory Council	
		<input type="checkbox"/> CBCAP			
		<input type="checkbox"/> PSSF			
		X N/A			
Milestone	Timeframe	November 2010 March 2013	Assigned to	Youth Advisory Council	
		March 2014 June 2013			
		June 2014 September 2013			

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	approval and resource availability				Youth Advisory Council
Strategy 4.4 Team meetings for children/youth with 3 or more placement disruptions in a quarter. Attendees to include the caregiver, birth parent, youth, social worker and service providers. DETETE: Social workers do not routinely use the TDM process for every placement move as is the Family to Family model, but they do facilitate their own meetings as needed. The strategy will be removed as it is an informal practice but we do not have the resources to formalize TDM.			<input type="checkbox"/> CAPIT	Strategy Rationale Stanislaus County has used TDM meetings, facilitated by a dedicate facilitator, since 2003 to stabilize placements and/or make placement decisions. Due to budget reductions, staffing dedicated to TDMs has been eliminated. A team process has been demonstrated and is a promising evidence based practice related to placement stability.	
			<input type="checkbox"/> CBCAP		
			<input type="checkbox"/> PSSF		
			<input checked="" type="checkbox"/> N/A		
Milestone	4.4.1 Update policies & procedures to reflect this new recommended practice	Timeframe	November 2010	Assigned to	System Improvement Manager
			July 2011		Regional Training Academy
Strategy 4.5 Provide training to social workers regarding cultural issues and their impacts on placement. Update: Due to the implementation of SDM during the 2010/2011 year and the Advanced SDM training, as well as Signs of Safety training, in 2011/2012, the academy training resources are not able to accommodate this extra training objective. Social workers are mandated to attend annual cultural heritage events to improve cultural competency.			<input type="checkbox"/> CAPIT	Strategy Rationale Information learned in the PQCR process indicates that social workers, county and FFA, are not consistently aware of the impact of culture on placement and may inadvertently make placements that result in conflicts due to this.	
			<input type="checkbox"/> CBCAP		
			<input type="checkbox"/> PSSF		
			<input checked="" type="checkbox"/> N/A		
Milestone	4.5.1 Provide training on culture and the impact on placement.	Timeframe	June 2011 January 2013	Assigned to	Regional Training Academy
			July 2011 March 2013		Managers
Strategy 4.6			<input type="checkbox"/> CAPIT	Strategy Rationale	

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<p>In partnership with Foster Family Agencies (FFAs), a child social history form will be developed to assist agency and FFA social workers in finding a placement family for a child.</p> <p>DELETED: Through the changes of the past year and the elimination of the Team Decision Making (TDM) process, social workers are finding it more helpful to communicate directly with FFAs. The use of an additional form is not expected to improve service delivery as was the case when TDM meetings were scheduled by a third party.</p>	<p><input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A</p>	<p>Foster Family Agencies and county social workers expressed challenges in effectively matching children to a foster home due to the dependence upon a TDM meeting invite form that only gave limited information about the child(ren) and his/her needs. Additionally, when children are new to foster care, or even to the social worker, they lack the needed information to help a potential placement determine if the child would be a good match for the home.</p>	
		September 2010	Supervisors Foster Family Agency staff
		December 2010	Supervisors Foster Family Agency staff
		February 2011	Supervisors Foster Family Agency staff
		May 2011	Supervisors Foster Family Agency staff
<p>Milestone</p> <p>4.6.1 Review sample tools at FFA Quarterly meeting.</p> <p>4.6.2 Formulate and approve final questionnaire</p> <p>4.6.3 Modify/develop agency policies and procedures</p> <p>4.6.4 Train county and FFA social workers in the use of the questionnaire. Monitor effectiveness of this tool during quarterly FFA meetings.</p>	<p><input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A</p>	<p>Strategy Rationale Placements are more successful when children have the opportunity to visit foster homes temporarily to evaluate for suitability for child's needs. Due to the emergency nature of most placements and the limited placement resources, there is often insufficient time to for pre-placement visits prior to the placement move must occur.</p>	<p>Assigned to</p>
		November 2010 January 2013	FFA social workers County social workers Supervisors
		January 2014	Manager
<p>Strategy 4.7 Partner with Foster Family Agency (FFA) to coordinate and facilitate pre-placement visits for children/youth prior to a placement change.</p> <p>Update: Due to staffing changes and reductions, this has not been the focus of efforts at this time.</p>	<p>Timeframe</p>	<p>Assigned to</p>	
		November 2010 January 2013	FFA social workers County social workers Supervisors
<p>Milestone</p> <p>4.7.1 Using the Plan.Do.Study.Act (PDSA) methodology, test out possible strategies of pre-placement visits with FFAs.</p> <p>4.7.2 Develop policies and procedures or</p>	<p>Timeframe</p>	<p>Assigned to</p>	
		January 2014	Manager

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	suggested practice guides to inform staff of successful strategies for pre-placement visits.	March 2013	Supervisor FFA
	4.7.3 Train social workers on procedures	March 2014 June 2013	Manager Supervisor FFA
	4.7.4 New: Survey social workers on the effectiveness of the training as it relates to social work practice.	August 2013	System Improvement Manager

<p>Describe any additional systemic factors needing to be addressed that support the improvement plan goals.</p> <p>Foster Parent recruitment and training has long been a challenge for the county given the large number of Foster Family Agencies (FFAs) operating within the county. FFAs offer greater financial support to foster parents, as well as weekly social worker support. Most of the foster parents being licensed by the county were preferring adoption with little risk of reunification. Babies and small children are the preference of county homes. As a result, and due to the elimination of the foster parent recruiter trainer position, Stanislaus County will rely more heavily on Foster Family Agencies for young children and those without behavioral challenges.</p>
<p>Describe educational/training needs (including technical assistance) to achieve the improvement goals.</p> <p>Wraparound Consultation, Grief and Loss Training, Cultural issues and the impact on placement.</p>
<p>Identify roles of the other partners in achieving the improvement goals.</p> <p>Foster Family Agencies (FFAs) are significant partners in the placement and stabilization of children in foster care.</p>
<p>Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.</p> <p>N/A</p>

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Outcome/Systemic Factor: PERMANENCY THROUGH ADOPTION, GUARDIANSHIP OR LIFE LONG CONNECTION					
County's Current Performance: Per the Quarter 4 2009 Outcomes Report, between 1/1/2009 and 12/31/2009 only 18.2% of children in foster care for 24 months or more exited to some form of permanency, significantly less than the National Standard of 29.1%; This declined to 12.9% by Quarter 1 2011. ¹ Of those children who emancipated during that same time period, 48.8% had been in foster care for 3 or more years. Analysis of data through business objects indicates that only 34.6% of children in placement have a concurrent plan. Supervisors also report an increase in the number of children transferring through the system without an identified concurrent plan should reunification not be successful.					
Improvement Goal 5.0 Increase the percentage of children with a concurrent plan of adoption or guardianship from 34.6% to 50%. A business objects report on August 31, 2011 of children with a concurrent plan showed that the percentage had improved to 57.5%.					
Strategy 5.1 Joint Assessment Meetings (JAM) will be revised and expanded to include FFAs in identifying permanent homes for children. Update: Adoption staff meets with other area adoption agencies monthly through the FACT team in order to improve family finding practices and to identify homes for difficult to place children/children without a permanent home. The JAM process was determined to be ineffective and adoptions worker and social workers meet directly to ensure permanency. The focus on concurrent planning and individual attention given by social workers and adoption workers is more likely to account for the improvement.	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	Strategy Rationale Joint Assessment Meetings (JAM) were an internal process developed to identify concurrent homes for children in foster care. Typically, county licensed foster/adoptive homes would be considered and FFAs or private agencies would be explored only when internal resources were insufficient. During the Self Assessment it was learned that FFAs are not being searched for concurrent homes upfront in the process, but rather when no alternatives present themselves and reunification efforts fail.			
		Assigned to			
		Adoption Supervisor Court/FR Supervisors Manager			
		Adoption Supervisor Court/FR Supervisors Manager			
Milestone	5.1.1 Revise policy and procedures for JAMs- F.A.C.T. team.		November 2010 COMPLETED	Assigned to	
	5.1.2 Train staff and implement policy changes		January 2011 COMPLETED	Adoption Supervisor Court/FR Supervisors Manager	
	5.1.3 Meet at least quarterly with FFA and private		November 2010	Adoption Supervisor	

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adoption agency leadership to discuss adoptions progress and any additional changes, strategies or supports.		COMPLETED		Manager	
5.1.4 Explore strategies to monitor effectiveness of FFAs on outcomes: Monitor permanency data at least quarterly, using Berkeley, Safe Measures & Business Objects to ensure that permanent homes are identified for children in foster care.		March 2011 Quarterly through 2013		Data Analyst Researcher System Improvement Manager	
Strategy 5. 2 Increase Guardianship awareness as an acceptable permanent plan.		Strategy Rationale Agency culture has been so strongly in favor of adoption that guardianship is not often considered as an acceptable permanent alternative for children.		Assigned to	
COMPLETED: Social workers are aware of Guardianship as an acceptable alternative and are using state/agency resources to educate families.		CAPIT			
		<input type="checkbox"/> CBCAP			
		<input type="checkbox"/> PSSF			
		X N/A			
5.2.1 Update policies and procedures to ensure that guardianship is articulated as an acceptable form of permanency		October 2010 COMPLETED		Data Analyst Researcher System Improvement Manager	
5.2.2 Train social workers on policies and procedures and explaining Guardianship to caregivers.		November 2010 COMPLETED		Data Analyst Researcher System Improvement Manager	
5.2.3 New: Survey social workers annually about practices and values related to permanency.		August 2012 and 2013		Data Analyst Researcher System Improvement Manager	

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Improvement Goal 6.0				
Increase the percentage of children placed with a relative from 18.5% to 35%.				
Milestone	Strategy 6.1		Strategy Rationale	
	Relative Placement Committee will be formed to examine policies, practices, attitudes and develop strategies to improve the placement of children with relatives.		<input type="checkbox"/> CAPIT	In our most recent outcome report (Quarter 4 2010, July 2011 data report), the placement of children with relatives increased from 18.5% to 22.0%. ¹ There are a number of reasons presented, such as criminal background check, family finding difficulties, ease of placement with foster parents, etc. The workgroup will assess the various factors to determine what training is needed, if any, what education about values and policies should occur, and to problem solve obstacles and identify potential solutions.
			<input type="checkbox"/> CBCAP	
			<input type="checkbox"/> PSSF	
			X N/A	
Update: Relative placement is brainstormed with supervisors in regular meetings. Training on Family Finding and revision to policies and procedures is on-going as needed.				
Timeframe		Assigned to		
6.1.1 Convene monthly meeting with supervisors and staff.		November 2010 Completed	Manager	
6.1.2 Brainstorm barriers and provide needed policy modifications/clarifications and or training.		February 2011 Completed	Manager	
6.1.3 Facilitate modifications, training or monitoring of the family finding database to improve use.		May 2011 Completed	Manager Supervisors	
6.1.4 Monitor relative placement rates quarterly during Supervisor meetings.		Quarterly through 2013	System Improvement Manager Supervisors	

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<p>Describe any additional systemic factors needing to be addressed that support the improvement plan goals.</p> <p>There has been a value from some agency and/or FFA staff that the primary "client" or customer is the adoptive parent for whom we are "finding a child." In reality the priority is really the child for who as home is being sought.</p>
<p>Describe educational/training needs (including technical assistance) to achieve the improvement goals.</p> <p>Recommended training for staff would include relative approval procedures and the criminal background exemption process.</p>
<p>Identify roles of the other partners in achieving the improvement goals.</p> <p>Foster Family Agencies, both those with Adoption agencies and those without, and Private Adoption Agencies are important in the identification of a permanent home for our county's foster children.</p>
<p>Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.</p> <p>N/A</p>

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Outcome/Systemic Factor: STANISLAUS COUNTY PROBATION

County's Current Performance: The Probation Department collaborated with Child Welfare Services (CWS), community stakeholders, and internal staff to conduct the Self Improvement Plan (SIP). This included participation in outcomes meetings with CWS staff and focus groups with staff and community stakeholders. This process started in the fall of 2009, when the Probation Department participated in the Peer Quality Case Review (PQCR) and then the County Self Assessment (CSA) in the spring of 2010. Placement Stability has been identified as the Probation Department's focus area due to the number of placement changes experienced by children placed through the Probation Department. A review of the research literature indicates that placement stability is greatly affected by the type of placement (i.e. matching the minor's needs) and the number of placement settings experienced. Based on the findings of the PQCR and CSA, there is a need to improve upon the methods in which minors are being properly initially and, when applicable, subsequently placed. During the PQCR and CSA, it was evident that the probation cases indicated a theme of utilizing case management and documentation of monthly visits, contact with minors and follow up with mental health and behavioral health professionals. Probation officers regularly reviewed case plans with youth and received their feedback. Additionally, low case loads allowed officers to maintain contact with group homes and provide them with updated health and education information. However, it was also found in the areas of youth assessment and placement matching that a validated assessment tool was not utilized in making initial or subsequent placement decisions. Furthermore, even though case documentation may be up-to-date, the anecdotal information or experiences probation officers have with minors is sometimes lost when cases are transferred between officers unless they are clearly noted in the file.

From the 2009-2010 FY to the 2010-2011 FY, we experienced a 34% increase in the number of minors ordered into out-of-home placement. Our average caseload size went from 18 minors per caseload (we have 3 placement officers) to 24 minors per caseload at the end of FY 2010-2011. This increase is due in part to a number of 300 dependency cases becoming 602 wards through the 241.1 process and the Courts own recognition of a large number of dysfunctional families coming through the delinquency court proceedings. The lack of other viable supervision options at a lower level have resulted in a number of high risk supervision cases being sent to out-of-home placement.

The increase has had some impact on the Department's ability to properly match minors with available placements. While all attempts are made to match minors to proper placements, this goal can sometimes be at odds with the need to get them out of custody and into a treatment environment. Officers are still meeting all of the required monthly contacts and updating all health and education information as required. With the new 2011 requirement to enter data into the CWS/CMS system, placement officers are adjusting workloads and schedules to meet the increasing demands on their time.

In January 2011, the Wraparound program was implemented for both Child Welfare and Probation Department placement youth. While this offered a new option to this population, the current allocated slots for minors for both agencies is only 12. Therefore the impact to the increased probation placement numbers has been minimal. This allocation of slots will be reevaluated in 2012 after the annual review of the program.

In July 2011, the placement unit experienced staffing changes. While there still are only 3 placement officers, one of these officers is new to placement. This officer is scheduled to complete the Placement Officer Core training in early 2012.

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Improvement Goal 7.0 Improve placement stability by better matching the minor to placement through the use of a placement matching tool. Proper placement matching is critical toward helping to ensure a minor's success.			
Strategy 7.1 Research placement matching tools and implement tool		Strategy Rationale Use of a validated assessment tool increases the likelihood that with proper initial placement, that stability will be increased. The Placement Supervisor will document efforts to research and identify placement matching tools and save this information in a shared folder on site. The placement supervisor will seek input and guidance from partner agencies and the State to help identify possible options.	
Milestone	7.1.1 Key participants convene	Timeframe	Assigned to
	7.1.2 Research and identify tools currently utilized to match minors with placements Research will continue through to remainder of the SIP period.		
	7.1.3 Train staff on matching tool and implement		
		October 2010-completed January 2011-completed Extend to September 2013 February 2011-completed September 2012-extended to allow for tracking of data from previous 12 months. See Strategy 8.1 for guidance March 2013-evaluate data from previous 18 months. June 2013-report back on trends, findings for the 18 months of data collected.	Juvenile Division Director Placement Supervisor Placement Supervisor Placement Unit Deputy Probation Officers Placement Unit Deputy Probation Officers

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Improvement Goal 8.0 Measure success rates of currently utilized foster care/group homes to better determine continued placement and for future rating against matching tool.			
Strategy 8.1 Develop an evaluation tool (i.e. Lickert scale) to track Group Home/FFA's success rates for currently utilized or used in the future so that this information can be used in conjunction with the matching tool to properly place minors.	Strategy Rationale Utilizing Group Homes/FFAs with higher success rates, when coupled with a proper placement match, will increase placement stability		
Milestone	8.1.1 Key participants to convene	Timeframe	
	8.1.2 Identify ways to measure and create evaluation tool Currently there is another county (Placer) conducting a similar evaluation process. Contact will be made to seek guidance on how best to implement our own evaluation tool.	October 2010-completed	Juvenile Division Director Placement Supervisor
	8.1.3 Implement Evaluation Tool	January-2014 Develop and Implement by March 2013. See Strategy 7.1.3	Placement Supervisor Placement Unit Deputy Probation Officers
	8.1.4 Analyze data from Evaluation tool	February-2014 Extend to March 2013 after gathering data on evaluation of online matching tool. See Strategy 7.1.3 Extended to April-May 2013	Placement Unit Deputy Probation Officers Placement Supervisor
		Assigned to	

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	<p>8.1.5 Rate/Rank Group Homes/FFAs based on data analysis</p>		<p>Extended to January 2013 June 2013-report on analysis</p>		<p>Juvenile Division Director Placement Supervisor</p>
<p>Strategy 9.0 Improve placement stability and increase potential for reunification by improving family engagement through active participation in the development of case plans and/or determining a minor's permanent placement (concurrent plan) should reunification fail. Incorporate the use of video case conferencing and increase family contacts for those minors in placement using this technology.</p>			<p>Strategy Rationale Through increased parental, guardian or extended family participation in the placement process, coupled with proper placement matching and use of higher quality Group Homes/FFA, the potential for reunification should increase for those identified cases. For those cases in permanency, placement stability should increase when family or extended family members are engaged the development of the minor's permanent plan.</p>		
<p>Milestone</p>	<p>9.1.1 Key participants to convene</p> <p>9.1.2 Identify ways to increase family participation in the development of case plans and/or in developing a minor's concurrent plan.</p> <p>9.1.3 Identify baseline engagement data. Implement family engagement plan We have sent staff to concurrent plan development courses and have created a family video conference room to be used for families to video conference with minors in placement if the family is unable to go to the minor's placement.</p>	<p>Timeframe</p>	<p>October 2010-completed</p> <p>November 2010-completed</p> <p>January 2011 Extend to January 2012</p>	<p>Assigned to</p>	<p>Juvenile Division Director Placement Supervisor</p> <p>Placement Supervisor Placement Unit Deputy Probation Officers</p> <p>Placement Supervisor Placement Unit Deputy Probation Officers</p>

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9.1.4 Evaluate progress as compared to baseline data	Extend to January 2013.	Placement Supervisor Placement Unit Deputy Probation Officers
<p>Describe systemic changes needed to further support the improvement goal. Presently, the Probation Department does not have access to CWS/CMS for placement-related data entry/tracking. Currently when a child enters an out-of-home placement the information is submitted to the Community Services Agency foster care unit to then be entered into CWS/CMS. The Probation Department utilizes an internal web-based Integrated Criminal Justice System (ICJIS-PB) to keep track of a minor's demographics, court referrals, placement changes, status reviews, and placement contacts. Presently, the ICJIS-PB system is also used to create hard copy reports (e.g. SOC158a) that are submitted to the county welfare eligibility team who enters this information into CWS/CMS. With access to data entry/tracking within CWS/CMS, it is hoped that future outcomes can be reported using that system that can help evaluate our goals.</p> <p>Update—Probation began utilizing the CWS/CMS system in March 2011. Data was available at the last reporting period (October 2010 to March 2011) to provide accurate feedback/report as the Probation Department began the data entry in the first week on March 2011. The next reporting period (April 2011 to October 2011) should include a more accurate and complete record to allow for evaluating some of our goals.</p> <p>As part of identifying baseline engagement data, the probation department will work to implement parent/family focus groups in 2012 in order to develop case plans and encourage participation from parents/family so that this data can be compared to similar focus groups in 2013. The hope is that through increased engagement, that there will be an increase in parent participation from one year to the next. It is also hoped that as an ancillary result, the parents/family will feel more engaged with respective officers and in the case plan development and can help the officers in developing more effective concurrent plans.</p>		
<p>Describe educational/training needs (including technical assistance) to achieve the improvement goals. As of March 2011, the probation department will have limited access to CWS/CMS for data entry. Training dates have yet to be determined for Stanislaus County.</p> <p>Update—Training has been completed on the CWS/CMS system. Officers are currently entering data into the CWS/CMS system.</p>		
<p>Identify roles of the other partners in achieving the improvement goals.</p> <p>TBD</p>		
<p>Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.</p>		

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None.

**Child Welfare Services Outcome Improvement Plan (CWSOIP)
NARRATIVE**

Child and Family Services:

In the 2010/2011 fiscal year, more than half of the CWSOIP budget was spent on social worker staffing in order to maintain positive, preventative practices such as Family Maintenance. A small amount will be apportioned to training and travel related expenses to enable staff to participate in Regional Training Academy sessions held outside of Stanislaus County. Additionally, \$511,303 was allocated to contract services, such as counseling services for families receiving on-going family maintenance and/or family reunification services.

In 2011/2012, Child and Family Services has been budgeted the majority of the funds to social worker salaries and associated costs. A portion has been budgeted for parenting services for CPS families, training, etc.

Probation

As far as new activities utilized by Probation, the placement unit is beginning to improve family participation so that youth could reunify in a timely manner. To do this, probation will be utilizing CWSOIP funds to do the following:

1. Provide lodging/travel/food costs for parents to visit minors in placement as part of case/reunification plan.
2. Provide Transportation costs not paid for by Group Home/FFA for weekend furloughs of minors to visit family as identified in their reunification/case plan.

In FY 2010-2011, the Probation Department allocated and expended funding (\$1603.10) to send a set of parents to visit their son placed at the Glen Mills School in Pennsylvania. While this was initially well received by the family, the logistics of traveling that distance was a burden on them because they had very little knowledge of air travel and lodging. While the Probation Department made all of the reservations in advance, the parents were required to provide their own credit card for the car rental, per the rental car policy. This was a barrier because they did not have a credit card and therefore could not rent a car.

However, the Probation Department was able to work with the group home staff to pick up the parents and drive them to and from their locations while on the two day visit. Again, while these efforts were appreciated, the family was frustrated that they did not have the liberty to travel as they wanted. They were able to meet with the minor as scheduled; however, they expressed that they would have liked more time with him. Overall, it was a good interaction and effort to engage the family in this way; yet, the obvious travel barriers made it necessary to redesign how family engagement could be improved between these youth and

their families without the need to make travel arrangement. Therefore, it was decided that a new type of interaction was needed.

As a result, an analysis of video conferencing capabilities of the our group home placements was conducted to find out what, if any, technical capabilities were available in most of the facilities we utilize. It was found that some larger and more remote group homes (e.g. Rites of Passage, Yerington, Nevada) used video conferencing hardware to conduct Courtroom appearances for minors. We presently use this hardware and type connection to hold Court hearings with certain out-of-state youth. Additionally, it was found that for those that did not have the video conferencing hardware, that they did in fact have an Internet connection. With the introduction of the Skype application and an Internet connection, video conferencing could also be achieved with this setup.

Therefore, with additional CWSOIP funding, the Probation Department purchased two sets of video conferencing equipment: 1) Video Conference Hardware similar to that used in Court proceedings, and 2) a computer and digital camera with Skype set up as its main utility. Additionally, a large screen monitor and related speakers were purchased to complete the Family Video Conference Room which is located in the Placement Unit modular building. The total expenditure for all video case conferencing equipment, television, computer, camera and setup for items was \$10,903.73.

Using the appropriate hardware/software to connect to the respective group home facility, families have been able to come on-site to conduct 30-45 minute visitations with minors in several group home facilities. Visitations are semi-private in that they are held in our facility, but families are given the flexibility to meet at almost any day of the week, depending on the minor's progress and group home resources. Family engagement, using these technologies, has increased which hopefully will improve the reunification process.

Additionally, in a recent audit by the Administrative Office of the Courts of our Title IV-E compliance, it was noted:

"Engagement of family is as important as notifying family. The Stanislaus probation department identified Family Finding and Engagement as an area needing improvement in their System Improvement Plan (SIP). The Stanislaus probation department has started a very good practice of using video conferencing and Skype to facilitate visits between parents, relatives and youth placed out of home. Overall, Stanislaus has made great improvements in their family finding and engagement efforts since the last review." (Stanislaus County Limited Title IV-E Compliance Site Visit Memorandum—Delinquency-August 2011).

Clearly the use of the video conferencing will be continue to be a major art of our continued progress towards improving family participation in the reunification

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plans. It can be very difficult to engage a family in the placement process once the minor has been ordered into out of home care. Probation knows that a minor has a better chance of being successful when the family is involved and participates in his/her treatment and placement program. Therefore we hope to engage families through these efforts to improve the success we have with our minors in out-of-home placement.

Furthermore, maintaining accountability of the minor while in the facility and during the duration of the placement episode is vital to the minor's success, especially when reunification is the plan. Therefore, the following additional activity was implemented utilizing CWSOIP funds:

3. Increased placement visits (in addition to monthly face-to-face contact) to include weekend and evening contacts to hold minor and Group Home/FFA accountable for program compliance.

In FY 2010-2011, the Probation Department conducted an after-hours (5pm to 10pm) group home visitation operation to six group homes in the Sacramento and Stockton areas in July 2010. Two teams of two officers visited group homes in their respective areas (Sacramento or Stockton). In all, contact was made with all minors in each group home and on-site group home staff was, for the most part, receptive to the after-hours visitation. Common responses from group home staff were, "Is everything ok?" or "Is there something wrong?" or "Are you taking (arresting) the minor this evening? Clearly our presence was not expected and when we assured the staff that we were just doing compliance checks of the minors and the homes, the tension they initially displayed was eased.

However, during one particular group home visit that evening, it was found that the air conditioning unit in the residence had not been working for a couple of days and that an alternative plan had not yet been implemented by the group home staff. According to the house manager, a repair person was scheduled to arrive within 2-3 days and as a back-up plan they were considering purchasing oscillating fans for the rooms and the main part of the home the following day. While this response seemed reactive, it appears that our presence that evening expedited the purchase of the fans the following day and the repair of the A/C unit was completed as scheduled.

From this operation, this strategy seemed to be useful in not only maintaining the accountability of the minors, but also more importantly, having a positive impact on holding the group home staff accountable as well. The total expenditure for this operation which included all staff time was \$1434.77. The Probation Department will continue to utilize this strategy as needed.

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CWSOIP Funds 2011-2012 Allocation

The 2011-2012 CWSOIP Probation allocation for Stanislaus County is \$14,468. It is expected that the strategy of continued evening and weekend group home visitations will be continued. Furthermore, a small amount may be apportioned to training and travel related expenses to enable staff to participate in Regional Training Academy sessions held outside of Stanislaus County.

ATTACHMENTS

**Stanislaus County Child & Family Services
2007-2010 System Improvement Plan (SIP)
Strategy Update**

	RECURRENCE OF MALTREATMENT	
Strategy 1.1	Quality Assurance Review Team (QART) Review all instances of repeat maltreatment for children 0-5 years & make recommendations re: practice, policy, training, etc (Implemented 2007) <ul style="list-style-type: none"> Eliminated due to elimination of Staff Developer position FY 2009-10 & System Improvement Supervisor position FY 2010-11 	ELIMINATED
Strategy 1.2	Family Engagement Meetings (FEM) Facilitated meeting with bio-family prior to case closure when risks remain, family not engaged in services, but children are safe so case not petitionable (Implemented 2007) <ul style="list-style-type: none"> TDM facilitator positions eliminated FY 2010-11 TDM Supervisor position eliminated FY 2010-11 TDM scheduler (ADCII) position eliminated FY 2010-11 	ELIMINATED
Strategy 1.3	Comprehensive Assessment Tool (CAT) Standardized safety & risk assessment throughout the life of a case (Implemented 2006) <ul style="list-style-type: none"> Report/monitoring capacity reduced due to budget reductions. 	CONTINUED
Strategy 2.1	Differential Response (DR) Three response paths to allegations of abuse and neglect in partnership with Family Resource Centers (FRCs) (implemented 2005) <ul style="list-style-type: none"> 6 AmeriCorps members eliminated FY 2009-10 due to budget reductions Services for children 6 – 17 years eliminated due to funding FY 2010-11. DR for 0 – 6 funded by Prop 10 (Children & Families Commission) 	ELIMINATED (6 – 17 yrs); CONTINUED for 0- 5 yrs
Strategy 2.2	Substance Abuse Prevention & Early Intervention <ul style="list-style-type: none"> Meth Task Force Participation continues (Implemented 2008) Sober living funding eliminated as not a mandated service FY 2010-11 	REDUCED

Strategy 2.3	AmeriCorps Members / Family Advocates Former birth parent or parent mentors serving with AmeriCorps to support and facilitate growth & development of current CPS clients (implemented 2005) <ul style="list-style-type: none"> • 1 Parent mentor in Family Reunification eliminated FY 2008-09 due to budget reductions • 2 Parent mentors in Family Maintenance & Families In Partnership eliminated FY 2009-10 due to budget reductions • AfterCare worker in Families in Partnership eliminated FY 2010-11 due to budget reductions 	ELIMINATED
	PLACEMENT STABILITY	
Strategy 3.1	Training for Foster Parents, Relative Caregivers & Social Workers Joint training provided to social workers, foster parents & relative caregivers. Relatives connected to the Family Partnership Center (KSSP) for on-going services <ul style="list-style-type: none"> • Staff Developer position eliminated FY 2009-10 • Foster Parent Recruiter & Trainer Position eliminated FY 2010-11 • Permanency Specialist position eliminated FY 2010-11 	REDUCED
Strategy 3.2	Placement Team Decision Making (TDM) meetings Facilitated meeting with youth, parent, caregiver, social worker, CASA, family, child's attorney and important others to make decisions about placement for children in foster care (implemented placement TDMs Feb. 2003, removal TDMs Sep 2004) <ul style="list-style-type: none"> • TDM Facilitator positions eliminated FY 2010-11 • TDM Supervisor position eliminated FY 2010-11 • TDM scheduler (ADCII) position eliminated FY 2010-11 	ELIMINATED
Strategy 3.3	Foster Parent & Placement Support Family to Family Initiative implemented in 2002 including the Foster Parent Recruitment, Development & Support strategy.	REDUCED

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	<ul style="list-style-type: none"> Recruitment of Foster/Adoptive Families limited due to the elimination of the Foster Parent Recruiter Trainer position FY 2010-11 Coordination & Deliver of specialized training for caregivers reduced due to the elimination of the FP recruiter trainer Implementation of Specialized Care Rate proposal to reduce foster care costs reduced due to the elimination of the FP Recruiter/trainer 	
	RE-ENTRY AFTER REUNIFICATION	
Strategy 4.1	Exit Team Decision Making (TDM) meetings TDM meeting held prior to reunification of children with parents to develop a plan of support with the family (Implemented 2007) <ul style="list-style-type: none"> TDM Facilitator positions eliminated FY 2010-11 TDM Supervisor position eliminated FY 2010-11 TDM scheduler (ADCII) position eliminated FY 2010-11 	ELIMINATED
Strategy 4.2	Connect Families to Community Support Community Partners invited to TDMs (implemented Feb 2007) <ul style="list-style-type: none"> TDM Facilitator positions eliminated FY 2010-11 TDM Supervisor position eliminated FY 2010-11 TDM scheduler (ADCII) position eliminated FY 2010-11 	ELIMINATED
Strategy 4.3	Quality Assurance Review Team (QART) Review instances of foster care re-entry following reunification & make recommendations re: practice, policy, training, etc (Implemented 2008) <ul style="list-style-type: none"> Eliminated due to elimination of Staff Developer position FY 2009-10 & System Improvement Supervisor position FY 2010-11 	ELIMINATED

ADDITIONAL CHANGES THAT MAY IMPACT OUTCOMES

LEAST RESTRICTIVE LEVEL OF CARE	
1695 Placements at Removal The Permanency Specialist completes many ER relative placements resulting in double the # of first relative placements <ul style="list-style-type: none"> • Permanency Specialist position Eliminated FY 2010-11 	REDUCED
Family Finding Database The Permanency Specialist coordinates with a dedicated Application Specialist from IS to conduct family finding research at the moment of removal for 100% of children. The database is updated annually to ensure the most current and accurate information is available to ongoing workers. PQCR indicated that this was already limited. <ul style="list-style-type: none"> • Permanency Specialist position Eliminated FY 2010-11 	REDUCED
Dedicated Foster Parent Recruiter / Trainer A social worker dedicated to the recruitment and training of County foster parents, including 30 hours of pre-licensure training that prepares them to care for Dependent children. Training offered continuously year round enabling the licensure of families for foster care and adoptions. <ul style="list-style-type: none"> • Foster Parent Recruiter / Trainer position eliminated FY 2010-11 	ELIMINATED
Foster Parent Support A small amount of funds designated to assist the Foster Parent Association in funding activities for foster families and foster children, e.g. Harvest Festival, Easter Event, etc. <ul style="list-style-type: none"> • Fund was foster care savings and was eliminated FY 2010-11 	REDUCED
FOSTER CARE, FIRST ENTRIES	
Removal Team Decision Making (TDM) meetings Includes parents, relatives, community & youth in determining if the safety factors warrant removal and/or a safety plan can be put into place to prevent foster care entry. <ul style="list-style-type: none"> • TDM Facilitator positions eliminated FY 2010-11 • TDM Supervisor position eliminated FY 2010-11 • TDM scheduler (ADCII) position eliminated FY 2010-11 	ELIMINATED
FAMILIES IN PARTNERSHIP (FIP) Multidisciplinary team including social workers, substance abuse counselors, public health nurses, domestic violence specialists, probation officer, mental health clinician, and family services specialist who working collaboratively with families at high risk of abuse and/or neglect to maintain children safely at home and prevent foster care entry. <ul style="list-style-type: none"> • Substance abuse counselors, public health nurses, 	ELIMINATED

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<p>domestic violence specialist, mental health clinician & probation officer positions unfunded and redirected back to home agency FY 2010-11</p> <ul style="list-style-type: none"> FIP disbanded and social workers integrated into a second family maintenance unit FY 2010-11 	
ADOPTIONS/EXITS TO PERMANENCY	
<p>Dedicated Adoptions Social Workers Social Workers dedicated to home finding, the home studying of potential adoptive parents, and the finalization of adoptions in a timely manner to reduce number of children in foster care awaiting adoption finalization.</p> <ul style="list-style-type: none"> Adoptions unit reduced from 7 SW in 2008/09 to 6 in 2009/10 Adoptions unit reduced to 4 SW in 2010/11 due to budget reductions 	REDUCED
NO MALTREATMENT IN FOSTER CARE	
<p>Dedicated Foster Parent Recruiter / Trainer A social worker dedicated to the recruitment and training of County foster parents, including 30 hours of pre-licensure training that prepares them to care for Dependent children.</p> <ul style="list-style-type: none"> Foster Parent Recruiter / Trainer position eliminated FY 2010-11 	ELIMINATED
TIMELY REUNIFICATION	
<p>SafeCourt Dependency drug court with one dedicated social worker and one substance abuse counselor to work closely with families at high risk of abuse or neglect and facilitate a timely yet safe return of children to their parents. Funded by Children and Families Commission (First 5).</p> <ul style="list-style-type: none"> Funding for program ended June 30, 2010 	ELIMINATED
<p>Sober Living Sober living residences, funded by Child and Family Services, where parents can live, often with their children, while participating in AOD treatment, often for 12 or more months. Ensures a safe place with supervision for children at risk of abuse or neglect to live with parents rather than placement in foster care.</p> <ul style="list-style-type: none"> Funding for all reunification families with children in placement or those ineligible for Welfare to Work (WTW) services eliminated FY 2010-11. 	ELIMINATED For non-Welfare to Work eligible families
OUTCOMES FOR TRANSITION AGED YOUTH	
<p>Dedicated ILSP and Aftercare Social Workers Two social workers dedicated to the provision of Independent Living Skills services to Dependent & Probation ILP aged and after care youth.</p> <ul style="list-style-type: none"> Social workers time reduced by 50% to this function and 50% to case management of Permanent Placement youth. 	REDUCED

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ILP Interviewers Two Independent Living Skills Interviewers who assist the Independent Living Skills coordinated in completing Ansell Casey life skills assessments and ILP planning with foster youth. <ul style="list-style-type: none"> ILP Interviewers eliminated FY 2010-11 	ELIMINATED
QUALITY ASSURANCE/DATA ENTRY	
SafeMeasures Software program that extracts data from Child Welfare Services/Case Management System at county, program, unit or caseworker level to facilitate data analysis and compliance review. <ul style="list-style-type: none"> SafeMeasures contract ended June 30, 2010 due to budget. 	ELIMINATED

**The above reflects changes to strategies and outcome improvement efforts that were implemented by the Child and Family Services Division in FY 2010/2011 in order to improve outcomes for children and families. It does not reflect the status of mandated services required by regulation and/or court order. As noted in prior sections of the SIP, some of these strategies were reinstated or in process, while others remain reduced/eliminated.*

**SYSTEM IMPROVEMENT PLAN (SIP) WORKGROUP
7/6/2010 Attendees**

Name / Agency

Janette Newberry, CSA- Program Manager
Narinder Kaur, Children Crisis Center- Case manager
Lizette Guzman, Sierra Vista Child and Family Services
Christine Soeth, CSA- ER Manager
Sheelah Grant, CSA- FR/Court Manager
Keith Sours, California Foster Families, Inc.
Gina Saenz, California Foster Families, Inc.
Gary Boyd, CSA- Court Social Worker
Chris Plasencia, CSA- FR Supervisor
Jeff Davis, CSA- Court Supervisor
Richard Allen, CSA- FR Supervisor
Phil Reilly, CSA- PP/3015 Supervisor
Sandra Genova, Aspiranet
Bergen Filgas, CSA- FM Manager

7/7/2010 Attendees

Name / Agency

Janette Newberry, CSA- Program Manager
Jean Little, CSA- ILSP/Aftercare Supervisor
Nenita Dean, CSA- ILP/Foster Care/PP Manager
Baby Castro, ILSP
Ariel, ILSP
Sharon Salaiz, Aspiranet
Agnes Perez, Families First
Jayne Hardy, Sierra Vista Child & Family Services
Cheryl Youngblood, Agape Villages
Mark Morrison, CSA- PP Social Worker
Steve Ashman, CASA
Sheelah Grant, CSA- FR/Court Manager
Elizabeth Moon, Probation
Donna Newman, Safe Harbor Family Services
Scott Ball, Probation
Dave Chapman, Probation
Chris Plasencia, CSA- FR Supervisor
Phil Reilly, CSA- PP/3015 Supervisor
Dayy Payne, CSA- ILP Interviewer
Bill Meenk, Safe Harbor Family Services
Sue Rodgers, Koinonia Family Services

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Bergen Filgas, CSA- FM Manager
Sal Perez, CSA- Aftercare Social Worker

7/9/2010 Attendees

Name / Agency

Janette Newberry, CSA- Program Manager
Evelina McDowell, Health Services Agency- Public Health Nurse
Narinder Kaur, Children Crisis Center- Case manager
John Sims, Children & Families Commission
Christine Soeth, CSA- ER Manager
Karen Servas- Community member
Shareen Singh, StanWORKs- Supervisor (for Jennifer Valencia)
Julian Wren, CSA- FM Supervisor
Oscar Contreras, CSA- FM Supervisor
Taryn Muralt, Center for Human Services
Holly Holmes, CSA- ER Supervisor
Tiffany Vanderpool, CSA- ER Social Worker
Jan Viss, CSA- Assistant Director
George Medina, CSA- ER Supervisor
Sheelah Grant, CSA- FR/Court Manager

**Child Abuse Prevention Council (CAPC)
8/5/2010**

(See Attachment pg. 85)

Other Public and private partners, foster parents, birth parents, ICWA liaisons were invited to participate but were unable to attend.

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CAPIT/CBCAP/PSSF Contact and Signature Sheet	
Period of Plan:	9/28/2010 – 9/28/2013
Date Submitted:	
Submitted by:	Board of Supervisor Designated Public Agency to Administer CAPIT/CBCAP/PSSF programs
Name & title:	Christine Applegate, Director
Signature:	
Address:	P.O. Box 42 Modesto, CA 95358
Fax:	(209) 558-2558
Phone & E-mail:	(209) 558-2500
Submitted by:	Child Abuse Prevention Council (CAPC) Representative
Name & title:	Jan Viss, Assistant Director
Signature:	
Address:	P.O. Box 42 Modesto, CA 95358
Fax:	(209) 558-2558
Phone & E-mail:	(209) 558-2500
Submitted by:	Parent Consumer/Former Consumer (Required if the parent is not a member of the CAPC)
Name & title:	N/A
Signature:	
Address:	
Fax:	
Phone & E-mail:	

CAPIT/CBCAP/PSSF Contact and Signature Sheet (continued)

Submitted by:	PSSF Collaborative Representative, if appropriate
Name & title:	N/A
Signature:	
Address:	
Fax:	
Phone & E-mail:	
Submitted by:	CAPIT Liaison
Name & title:	Bergen Filgas, Manager III
Address:	P.O. Box 42 Modesto, CA 95358
Fax:	(209) 558-2558
Phone & E-mail:	(209) 558-2057
Submitted by:	CBCAP Liaison
Name & title:	Bergen Filgas, Manager III
Address:	P.O. Box 42 Modesto, CA 95358
Fax:	(209) 558-2558
Phone & E-mail:	(209) 558-2057
Submitted by:	PSSF Liaison
Name & title:	Bergen Filgas, Manager III
Address:	P.O. Box 42 Modesto, CA 95358
Fax:	(209) 558-2558
Phone & E-mail:	(209) 558-2057
Board of Supervisors (BOS) Approval	
BOS Approval Date:	
Name:	
Signature:	

CAPIT/CBCAP/PSSF PLAN

County SIP Team Composition

Stanislaus County's SIP team consisted of Child and Family Social Workers, Supervisors, Managers, FFA Social Workers and leadership, Juvenile Probation, Members of the CAPC Committee, Children and Families Commission (Prop 10), CalWORKs, and other key community partners.

CAPC

On February 19, 2002, the Stanislaus County Board of Supervisors established the Child Abuse Prevention Council (CAPC) as a subcommittee of the Stanislaus Children's Council. Though the CAPC was a subcommittee, it always functioned independently of the council in its efforts of bring awareness of child abuse in the community. The 2005-2008 3-year plan restructured the CAPC in that it no longer functioned as a subcommittee, but as an independent entity as required under W&I Code Section 18983.5 Furthermore, the Stanislaus County Board of Supervisors approved the Child Abuse Prevention Council (CAPC) by-laws under Welfare and Institutions Code Chapter 12.5, Section 18980.

The Child Abuse Prevention Council of Stanislaus County provides a local forum for interagency cooperation and coordination of services in the areas of prevention, intervention, and treatment as it relates to child abuse and neglect. The Council is made up of a broad array of community-based organizations, and public agencies. The membership roster as specified in W& I code section 18970(c) is maintained and published through Board of Supervisors action. CAPC carries out the function of the PSSF collaborative. The participation in CAPC is voluntary, and therefore no funds are utilized to support attendance of meetings.

Funding of the Children's Trust Fund (CTF) is overseen by the CAPC and is utilized for community based non-profit agencies that provide parenting classes, substance abuse treatment, and counseling. The population served by these agencies includes the designated underserved populations identified through the SIP process. All actions regarding provision and planning of services funded through the Children's Trust Fund brought to the CAPC for input and discussion. Final approvals for contract awards are submitted to the Stanislaus County Board of Supervisors.

The CAPC is a collaborative body which is community-driven and serves as a forum for program and community collaborative sharing, service planning, and perpetuating the philosophy of agencies and communities working together for the most positive, productive, and safe outcomes for children and families. All members adhere to the purpose of the council which is to coordinate the

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community's efforts to prevent and respond to child abuse and neglect (W&I Code, chapter 12.5, 18982)

The CAPC has always maintained at least one parent representative. The parent is an appointed voting member of the council and shares an equal role with other members of the council which may include developing RFPs and oversight of CTF funding. In an effort to promote parent participation and leadership training, and possible monetary support may be considered. The parent member, as well other council members, takes an active part in our child abuse prevention efforts and campaigns.

Stanislaus County Child and Family Services and the CAPC have always enjoyed a close working partnership. CAPC in coordination with Child and Family Services are responsible for contract monitoring, integration of local services, fiscal compliance, data collection, amendments, reports, and outcome evaluations. They have learned from experience, that better outcomes for children in our community are achieved only when both government and community based organizations work collaboratively. All actions regarding provision of services for community-based services funded through CTF including proposal review, training opportunities and additional services are brought before the CAPC collaborative bodies for discussion and input. Final approvals for contract awards are submitted to the Stanislaus County Board of Supervisors. It is the CAPC liaison that ensures that all reporting requirements are done so in a timely manner and has regular communication through out the County and with the Office of Child Abuse and Prevention regarding CAPC activities.

CAPIT/CBCAP/PSSF/CTF Fiscal Narrative

Stanislaus County has strived to meet all fiscal requirements of the funding entrusted to us. All CAPIT/CBCAP/PSSF/CTF contractors are required to submit monthly statistical and expenditures reports and an annual report detailing how goals were accomplished. Monthly reports mirror the format required by the California Department of Social Services (CDSS), Office of Child Abuse Prevention (OCAP). CSA already tracks separately all service providers' expenditures, services provided and the demographic information regarding individual/families served. The annual report OCAP continues to be the model for data collection. Current CAPIT/CBCAP/PSSF contractors submit data electronically to CSA. This standard practice will continue for all future contractors.

The CAPIT/PSSF Coordinator/Liaison is responsible for insuring that the monitoring plans are carried out, contractors are in compliance with program guidelines, goals and outcomes are achieved and reporting meets the

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demographic requirements established by OCAP and CSA. This includes families that have come to attention of Child Welfare due to issues of abuse and neglect.

Monthly invoices are desk audited by our Contracts Administration staff prior to reimbursement. Desk auditing procedures include verification that costs invoiced are consistent with the contract and are allowable under all applicable Office Management and Budget (OMB) circulars and guidelines. Back-up documentation is attached and matches the invoices. Invoices are be routed to the CAPIT/CBCAP/PSSF/CTF coordinator to verify that services are appropriate, meet the intent of the program, and have been provided. Contractors will be required to submit annual independent audits no later than 120 days following the end of the contractor's fiscal year. Audits are reviewed by Contracts staff utilizing a standardized audit checklist. Agencies whose audits are found to contain findings related to or impacting the provision of CAPIT/CBCAP/PSSF/CTF services shall be required to submit a Corrective Action Plan. Agencies failing to comply with this requirement shall be subject to termination of their contracts. Successful completion of a required Corrective Action Plan will be a consideration for continued or additional funding under CAPIT/CBCAP/PSSF/CTF.

The funding received from CAPIT/CBCAP/PSSF/CTF funding streams is utilized in service provider contracts and are reviewed quarterly to determine the maximum level of services are provided. Funding is leveraged through management by CSA which ensures annual funds are used first and funds which can roll forward to sustain future services are retained. The attached worksheets represent the annual CAPIT/PSSF/CBCAP Service Goals and Expenditure Plan Summary. The expenditure plan lists the percentage of the funds that are allotted to provide these services.

Budget Impacts

Stanislaus County has always valued supporting community based organizations and their work with our County's children and families. Since 2001, the Stanislaus County Community Services Agency (CSA) has combined the CAPIT/PSSF funding with CTF and CBCAP in the development of its RFPs. This was done in an effort to provide broad based community support, continuity of services, streamline the bidding process, eliminate duplication of services by reviewing all proposals at one time, and improve efficiency by having one panel review the proposals. This consolidated process was also intended to simplify the process for bidders where one proposal could be considered in multiple funding categories.

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Recent budget realities have caused a shift of PSSF and CAPIT funding internally in order to meet the federal and state mandates for children and families known to the Child Welfare system. Furthermore, Differential Response services is no longer being offered to youth ages 6-17 and the only contract identified to support youth ages 13-17 is that of the Hutton House services through the CTF funding.

To continue to demonstrate support of child abuse prevention in the community and potentially meet some of the gaps created as a result of budget impacts a recommendation was taken to the Stanislaus County Board of Supervisors to extend the current CTF contracts until the end of that fiscal year. Furthermore, a portion of the CTF funding was designated to the only remaining women and children's clean and sober living environment that was in jeopardy of closing.

In January of 2011 the Child Abuse Prevention Council presented a five year spending plan of the Children's Trust Fund to the Stanislaus County Board of Supervisors that identified the use of CTF funding as local match to help draw down Federal and State basic allocation for services that meet the criteria for CCF funding requirements.

On May 3, 2011 Community Services Agency on behalf of Child Welfare Services presented to the Stanislaus County Board of Supervisors a request to accept an anonymous community donation. This donation in combination with other funding strategies like that of the Children's Trust fund will allow Child and Family Services to meet their total local match for Federal and State funding for fiscal year 2011/2012.

As a result of this new availability of funding Child and Family Services plans to partner with the Children's and Families Commission to reinstate Differential Response for children ages 0-17 utilizing PSSF and CAPIT funding. The existing Differential Response contracts will be extended to end June 2012 at which point an RFP process will begin. In addition, a sole source contract was developed with the Haven's Women Center to provide school based counseling group for children ages 4-12 affected by domestic violence utilizing CBCAP funding.

RFP process

Stanislaus County has developed a tradition of using the competitive bid process for its contracts and upcoming RFP will be no exception. It will use the competitive bid process that is outlined in the RFP section IX, A-E. Based on the instruction in the RFP, this process will include the following: 1) RFP invitation is sent, 2) RFP is reviewed by an independent review committee/panel made up of representatives from various community agencies who are aware of the needs of the community, 3) Panel will make recommendations based on the wide spectrum of services in various geographical areas paying special attention to avoid duplication of services, 4) Proposers will be notified in writing of the panel's recommendations and will be provided with an opportunity to respond or to file a

grievance, 5) Recommendations will be brought to the CAPC, and 6) Final award approval for RFP will go to Stanislaus County Board of Supervisors.

This RFP process will give priority to private, nonprofit agencies whose prevention programs serve children who are at risk of abuse and neglect. Agencies are required to provide services which are culturally and linguistically competent. They must comply with federal requirements that anyone who has or will be awarded funds has not been suspended or debarred from participation in an affected program. They shall demonstrate the existence of a 10 percent in-kind match. The population served will include minorities and children ages 6-17 years of age and under. Special attention will be given so that services are not duplicated, are in line with our SIP, and avoid supplantation. Engagement, short term, immediate, and long term outcomes will be built into the scope of work or the RFP as well as a discussion regarding the usage of a peer review process for CBCAP funded activities. Training and technical assistance will be provided to these agencies and communication will be available both written and electronically.

Development of this RFP process is scheduled for November 2010 and is projected to take 4-6 months. We anticipate the focus of services to be Differential Response, ages 6-17. Currently we only have one service provider offering DR to this age group and they are focused on youth 13-17 that experience ongoing conflict with their caretaker. Prior to fiscal year 2010/2011, the Family Resource Centers provided DR for ages 6-17 and their families. Currently their focus is serving children 0-5 and their families. The FRC's are located in Central/South Modesto, North Modesto/Salida, Ceres, Hughson and the Eastside communities, Turlock, and the Westside (Newman/Crows Landing, Grayson/Westley, and Patterson), and Hutton House is located in Modesto.

Service Array

Stanislaus County implements an array of services for children and families in an effort to meet the needs of the family in the area of safety, well-being, and permanency. Initial contact with the Child Welfare system is frequently through the emergency response hot line. The intake social worker completes the Comprehensive Assessment Tool (CAT) assessment and will either provide resources to the caller or assign for Differential or traditional emergency response investigation. Path 1 Differential Response services are provided solely by the community partners, whereas with Path 2 and 3 a determination is made about the best service delivery modality, either community services or child welfare services.

The Differential Response program is an alternative, intake, assessment and service delivery structure that allows a child welfare agency to respond in a more flexible manner to referrals of child abuse or neglect. There are three paths of response which may include an agency social worker and a community partner.

Path 1 is for families with low or no risk of abuse/neglect, as assessed at Intake, and referred to a community organization, typically a Family Resource Center (FRC), for a strength-based assessment, case management, parenting and other supportive services as determined by the family in partnership with the FRC. The referral is closed at the Intake hotline with no further child welfare involvement.

Path 2 is families with moderate risk of abuse/neglect, as screened at Intake, are assessed by a child welfare social worker in partnership with a community partner. The risk and safety assessment guides the decision about the appropriate level of service, that is, further child welfare involvement or community partner service delivery.

Path 3 is a child abuse and neglect report that indicates children are unsafe and/or at high risk of abuse or neglect and are immediately assessed by a child welfare social worker. If a differential response community partner has been working with the family, they may accompany the social worker. Families are served whether through the traditional child welfare systems of voluntary services or court, but if they have zero to low safety/risk factors, they may be served by a community partner.

The Differential Response Family Resource Centers service areas are based on zip codes in Stanislaus County. Our partners include: Ceres Partnership for Healthy Children; Westside Family Resource Network - Newman Healthy Start, Westside Resource Center, and Grayson/Westley Family Resource Center; Parent Resource Center Sierra Vista Drop In Center, Airport Neighbors United; Hughson Family Resource Center; Turlock Family Resource Center. Differential Response program also serves some targeted groups: Hutton House which works with teenagers and their parents; and Health Services Agency, Public Health for substance exposed infants.

Community Partners providing Differential Response services, such as the Family Resource Centers, offer strength-based assessment, case management, parenting education and support, depression screenings, linkages to other health services and developmental screenings. Effective July 1, 2010, Differential Response services are solely funded by the Children and Families Commission (First 5/Prop10) and available to families with children 0 to 5 years of age. Differential Response is no longer funded for children 6 to 17 years, with the exception of Hutton House for teens. Efforts are currently being made to identify community based or faith based services that will potentially provide prevention services to these youth.

When an allegation of sexual abuse is being investigated children may be interviewed at the CAIRE center when appropriate. The County of Stanislaus, in partnership with the District Attorney, all local law enforcement agencies, child protection agencies, the mental and medical health community, schools, and

others concerned with the care and protection of children, seek to protect child victims and witnesses who are exposed to abuse, is the mission statement of the Child Abuse Interviews, Referrals, and Evaluation (CAIRE) Center. It is child friendly, providing a single point of access for forensic interviews, medical examinations and therapeutic services to young victims of crime. The CAIRE Center is located in Modesto, California adjacent to a Sheriff's substation. A trained forensic interviewer interviews the child while professionals associated with the case are informed and present behind a one-way mirror, listening to the child's report. Observers can ask questions via an earpiece in the interviewer's ear, enabling information to be shared without further traumatizing the child. The CAIRE Center interview, in most cases, will be the final interview of the child, thereby minimizing further trauma to the child. The family is also introduced to Mental Health Clinicians who can provide therapy and support until the family gets connected with an ongoing therapist.

Law enforcement, an attorney from the district attorney's office, and an emergency response social worker observe the interview. An advocate from the Haven Women's Center and a representative of the District Attorney's Victim Witness program are available. Short term mental health counseling and case management are also available while families are linked to on-going services. The Haven Women's Center is our county's domestic violence program whose goal is to empower victims of domestic violence to act as their own advocates for safety for themselves and for their children.

To determine the best match of services for family, the Emergency Response social worker utilizes a multidisciplinary team decision process. They will either engage a voluntary services worker to conduct a joint assessment of the families needs and program capability or utilize a Team Assessment Planning meeting (TAP) for discussion of other options for the family. If the social worker's assessment indicates that children are unsafe and removal should be considered, a TDM was scheduled and decision with the family made. Team Decision Making (TDM) meetings were discontinued effective July 16, 2010 due to budget cuts. Other multidisciplinary meetings occur throughout the Child Welfare system such as Differential Response Multidisciplinary Team (MDT), Joint Assessment Meetings (JAM), Interagency Resource Committee (IRC), Interagency Placement Committee and Coordinated Case Planning in an effort to continue to promote these ideals.

When a family engages with pre-placement preventative services the children are usually in the home, however voluntary placements can be utilized in an effort to expedite treatment.

Family Maintenance provides pre-placement preventative services to families who have been assessed by ER to need continued services as a result of a substantiated CPS investigation. Family arrangements or voluntary placements enable resources to be implemented while children can remain in a safe and

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stable environment. In addition, some PSSF funding has been designated to Family Maintenance staff to support case management and resource/referral.

Child Welfare has a contract based encumbrance system to provide community services to children and families, including:

- Kinship Supportive Services which offers respite, support groups, tutoring, counseling, medical support, and legal support
- Local parenting programs
- Linkages
- In-patient and outpatient drug treatment programs
- Family Unification Program, Section 8 Certificates

If it is determined that the children and family's needs would be better served through Court intervention the following services are available to families and children when children are in out of home care:

- Parenting
- Substance abuse treatment
- Mental health treatment
- Family Unification Program, Section 8 Certificates

Of these services Substance Abuse has been identified as a key component within families that are brought to the attention of Child Welfare services and are in need of ongoing services. The abuse of substances and the subsequent lifestyle that leads to child neglect and endangerment is a cornerstone of most cases within Stanislaus County. Due to current budget constraints funding for alcohol and drug (AOD) treatment is limited. To meet this unmet need PSSF/CAPIT funding is being utilized to contract with treatment providers. By offering this intervention parents have the opportunity to gain sobriety and develop the skills to ameliorate the issues that impeded meeting their children's basic needs.

When children are removed from their parents/caretakers the **Court** unit presents the information to the Juvenile Court as well as provides services to families and children when allegations of child abuse and neglect are found as defined by Welfare and Institutions Code Section 300(a-j). A Court Worker provides information and resources to the parents while Placement Specialists focuses on the children's needs while they are in foster care or relative placement.

After the court sustains a petition and develops a case plan, the family is transferred to **Family Reunification** for up to 18 months. A social worker provides resources and monitors the parent's progress with their court ordered case plan, while supporting the children and their needs in foster care. In the event a child is unable to reunify, a permanent plan is established. In addition to the Family Reunification program there are areas that target the specific needs of youth. Through a partnership with Behavioral Health and Recovery Services

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(county mental health department), the Children System of Care provides mental health assessments and services to dependent children.

For youth who are unable to reunify and do not have a permanent plan for guardianship or adoption the **Permanent Placement** unit provides ongoing case management services and facilitation of life long connections. **Independent Living** skills for youth 16 and older and **Aftercare** services for youth transitioning/transitioned from dependency to adulthood are also provided by social workers.

Stanislaus County is currently participating in the California Connected by 25 Initiative (CC25I). The California Connected by 25 Initiative is a strategy helping public child welfare agencies and their communities to build comprehensive supports and services for transitioning foster youth. The goal of the initiative is to connect foster youth to opportunities, experiences and supports that will enable them to succeed throughout adulthood. As part of this initiative Stanislaus County developed the following three programs:

Transitional Housing for Foster Youth (THP Plus) with employment services: The Host Family Model or a Lifelong Connection model of transitional housing with employment services (My Home THP+): This is a caregiver model of transitional housing which provides financial assistance for housing to foster youth between the ages of 18 and 24 to enable them to reside with adult connections who have committed to provide emotional permanency, or lifelong caring and emotional support, for the youth. The youth contributes to the cost of room and board in gradually increasing amounts. The scattered site model of transitional housing was implemented in 2007. This model provides youth the opportunity to live independently in an apartment close to their school and job. Youth who have been successful in Host Family Model can move into the scattered site model. Supportive Services are provided to ensure that the youth successfully completes the program and becomes a responsibly adult.

Gateway Bridge Project: The Gateway Bridge Project is a partnership with Modesto Junior College with linkages to California State University, Stanislaus and a partnership with Alliance Worknet (Formerly department of Employment and Training). The goal is to link former foster youth to post-secondary education with job training and employment opportunities. The Gateway Bridge Project is a learning community program with MJC that offers one semester of 12 college units. The classes are a combination of former foster youth and other disadvantaged youth and adults that are eligible for Extended Opportunity Program Services (EOPS). The former foster youth are provided wraparound case management services by a CSA aftercare social worker. In addition there are counselors in the classroom, tutoring is available and ongoing academic support from their teachers and financial support and services through EOPS. Once the youth completes the one semester of Bridge they are supported and

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encouraged to continue their education by choosing a vocational and/or career path offered through MJC.

The Individual Development Accounts (IDA) was implemented in year 2, 2006/2007. The IDA is a goal oriented savings account for emancipated foster youth 18-24 years of age. The accounts are held at a financial institution. Contributions are matched for qualifying purchases (\$1-\$1 match) up to \$2000 during a 24-month period. The program will serve up to 20 foster youth. By continuing our commitment to community collaboration between agencies, CSA made and entered into an agreement with Center for Human Services to provide Asset Management services to our youth who enroll in the IDA program. CSA also entered into a partnership with Bank of the West who holds the matching monies in their financial institution.

When a child is placed in foster care a concurrent plan is established to ensure that a child has an alternative if the parents are unable to reunify. **Adoption** is the most permanent of these plans. Adoption Social Workers screen, train, and conduct home studies of concurrent homes prior to placement. They monitor perspective adoptive homes and guide the children through the adoption process.

Other unique programs or special prevention services provided include:

Stanislaus County Family Justice Center

The Stanislaus County Family Justice Center (StanFJC) is a one-stop center for families experiencing domestic violence, sexual assault, child abuse and elder abuse. The StanFJC utilizes a multi disciplinary team approach with partners from the District Attorney's office, Community Service Agency, County Board of Supervisors, the Haven Women's Center, local law enforcement, Behavior Health and Recovery Services, and medical services.. Crisis intervention, counseling, victim advocacy, medical services, basic assistance are available on site

Drug Endangered Child/Elder Dependent Adult Multidisciplinary Team is a collaborative between the Community Services Agency, Stanislaus County Health Services Agency, Stanislaus County Drug Enforcement Agency, California Multijurisdictional Methamphetamine Enforcement Team, and Stanislaus County District Attorney's Office. They provide a coordinated response to families involved in clandestine manufacturing, sales, and/or possession of controlled substances when children, elderly, and/or dependent adults are expected to be present.

Haven's Women's Center: Domestic Violence

The Haven's Women's Center Advocacy Program's goal is to empower victims of domestic violence to act as their own advocates for safety. The broader goal of this program is to protect children and adults who are at risk and to reduce the recurrence of child abuse and/or neglect.

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Parents United

Parent's United of Stanislaus County is a non-profit agency in the community that provides individual and group counseling for victims of sexual abuse. It also provides treatment for family members as well as the offender.

Aspira Foster and Family Services: Pro-Family Program

This program is an intensive family reunification program that utilizes a short-term paraprofessional mentoring component. Services include family-centered service planning, crisis counseling, transportation, home visitation and parent specific education. The service population is families that have had children removed from their care and are in the process of reunification. Referrals are made by social workers from the Stanislaus County Community Services Agency Child Family Services Division. The service site will be at the home of the family being served. Although funding was originally cut during this year's budget due to the utilization of PSSF funding the contract was reconsidered.

Parent Resource Center: Adult Parenting Program

The mission statement of the Parent Resource Center is to build stronger, healthier families by offering volunteer in home mentoring and education support services to parents who are at risk for child abuse and neglect. This program provides two weekly 20-week parenting support and education classes, four classes a year including two Spanish speaking classes. The program provides case management and referral services to 80 parents annually and provides in-home volunteer mentors to 20 high-risk parents annually offering emotional support/parent education.

Children's Crisis Center: Respite Child Care Program

The Children's Crisis Center is the only shelter service for abused, neglected and at-risk children in Stanislaus County. It is a safe place for parents to bring their children when they need a "break" from parenting. The Center focuses on prevention, intervention and crisis counseling through the Respite Childcare Program, the Family Nurturing Program, FamilyLINE and the Family Advocacy Program. It also provides crisis counseling and case management support services to families needing child abuse prevention/intervention services.

The service array linked with Child Welfare spans past the completion of services. The following resources are available to families and youth that have participated in the Child Welfare System:

Mental health and Family Maintenance services for adoptive families.

Adoption support group, Adoption Assistance Program (AAP) and MediCal. The Adoption Assistance Program is available to both relative and non-relative families who adopt children from foster care. AAP reduces financial barriers to

the adoption of children who might otherwise remain in foster care. Eligibility is not based on family income, but rather on the eligibility of the child. The AAP rate is negotiated with each family, and is based on the child's basic and special needs and the circumstances of the family.

CAPIT/CBCAP/PSSF funded programs for fiscal year 2010-2011

Intensive Family Reunification Services

Aspira Foster and Family Services: Pro-Family Program

This program is an intensive family reunification program that utilizes a short-term paraprofessional mentoring component. Services include family-centered service planning, counseling, transportation, home visitation and parent specific education. This program fits two federal outcomes: 1) Reduce the recurrence of child abuse and/or neglect and 2) Reduce time in foster care to reunification without increasing re-entry. The service populations are families that have had children removed from their care and are in the process of reunification. Referrals are made by social workers from the Stanislaus County Community Services Agency Child Family Services Division. The service site will be at the home of the family being served. Staff provides transportation and support to medical, treatment and housing appointments to facilitate attendance, comprehension, and follow through. Due to caseload and resource availability without this service there would be an unmet need that would create a barrier to reunification.

Drug Treatment

Adult Residential Treatment Program

- **Stanislaus Recovery Services**
- **Nirvana**

As previously mentioned substance abuse has been identified as main contributor to the abuse and neglect of children. The abuse of substances and the subsequent lifestyle that leads to child neglect and endangerment is a contributing factor to most cases within Stanislaus County. Due to current budget constraints funding for alcohol and drug (AOD) treatment is limited. To meet this unmet need PSSF/CAPIT funding is being utilized to contract with treatment providers. These programs include social model residential treatment and recovery programs, using a phase-based approach. Admission, placement and length of time in the program are determined by individual need. They are voluntary programs specializing in treating individuals who have relapsed and/or been resistant to other types of treatment. Services include parent education and support, case management, and information and referral. Day Treatment,

Intensive Outpatient Programs and Relapse prevention services are also available. Treatment can be 'stepped' down or up depending on an individual's need. Adults referred have priority because their children are being served by Child and Family Services and are at high risk of abuse and neglect. Services are offered in both Spanish and English, and are culturally competent. A specialized program for dually diagnosed clients who also suffer from co-occurring mental health issues is available.

Counseling Services and Adoption Support

Sierra Vista Counseling

Sierra Vista is a counseling organization that offers individual group counseling regarding issues of anger management, trauma, mental health, and school age issues. They have services to address the special needs of children who are not successful in a regular day school including an ADHD clinic. Priority for services is given to children who are at high risk, including children who are being served by the county welfare departments for being abused and neglected, pre adoptive families, and other children who are referred for services by legal, medical, or social services agencies. Individual and group counseling services for adults and children to help break the cycle of abuse and children receive individual and group counseling to help heal the wounds and increase their personal safety. Domestic violence treatment, anger management treatment and Spanish speaking services are available. Parenting is offered individually, in a group, parent child labs and activities that expedite and support the adoption process.

Drug Treatment and Parenting

Sierra Vista First Step

First Step is a drug and alcohol treatment program for pregnant, postpartum and parenting women and their children. Priority for services is given to children who are at high risk, including children who are being served by the county welfare departments for being abused and neglected and other children who are referred for services by legal, medical, or social services agencies. The goal of the program is to assist and support women in developing positive parenting skills while learning to live a healthy, drug-and alcohol free lifestyle.

Women with children who are under the age of 18 can participate in group and individual alcohol and drug treatment services. While attending treatment, the Child Development Center is available for care of children age five and under. The year-long program is designed in a multi-phase model offered in both English and Spanish. Advancement in the program is contingent upon meeting specific treatment goals, completion of assignments, and maintaining abstinence of drug and alcohol use at each phase.

Adoption Support Group

An adoption support group is held monthly for perspective and adoptive parents. It is facilitated by a mental health clinician who guides the families through issues that may impact the adoption process and successful adoptive homes. Resource and referral is also available to participants.

Crisis Center: Respite Child Care Program

The Children's Crisis Center is the only shelter service for abused, neglected and at-risk children in Stanislaus County. It is a safe place for parents to bring their children when they need a "break" from parenting. The Center focuses on prevention, intervention and crisis counseling through the Respite Childcare Children's Program, the Family Nurturing Program, FamilyLINE and the Family Advocacy Program. It also provides crisis counseling and case management support services to families needing child abuse prevention/intervention services.

Hutton House: Respite Teen Program

Hutton House is a state licensed temporary shelter for runaway, homeless and youth in crisis who are ages 13-17. It provides services in a residential setting for 8 youth at a time for a maximum of 15 days. Day services are available for youth and their families. Crisis line is available 24 hours a day. Assessment of client needs, individual, group and family counseling, substance abuse assessments and education, drop-in counseling services, information and referrals, and advocacy, parent support and education are also available

CAPIT/CBCAP/PSSF funded programs for fiscal year 2011-2012

Family Preservation and Family Support

Differential Response

The Differential Response program is an alternative, intake, assessment and service delivery structure that allows a child welfare agency to respond in a more flexible manner to referrals of child abuse or neglect. There are three paths of response which may include an agency social worker and a community partner.

Path 1 is for families with low or no risk of abuse/neglect, as assessed at Intake, and referred to a community organization, typically a Family Resource Center (FRC), for a strength-based assessment, case management, parenting and other supportive services as determined by the family in partnership with the FRC. The referral is closed at the intake hotline with no further child welfare involvement.

Path 2 is families with moderate risk of abuse/neglect, as screened at Intake, are assessed by a child welfare social worker in partnership with a community partner. The risk and safety assessment guides the decision about the appropriate level of service, that is, further child welfare involvement or community partner service delivery.

Path 3 is a child abuse and neglect report that indicates children are unsafe and/or at high risk of abuse or neglect and are immediately assessed by a child welfare social worker. If a differential response community partner has been working with the family, they may accompany the social worker. Families are served whether through the traditional child welfare systems of voluntary services or court, but if they have zero to low safety/risk factors, they may be served by a community partner.

The Differential Response Family Resource Centers service areas are based on zip codes in Stanislaus County. Our partners include: Ceres Partnership for Healthy Children; Westside Family Resource Network - Newman Healthy Start, Westside Resource Center, and Grayson/Westley Family Resource Center; Parent Resource Center Sierra Vista Drop In Center, Airport Neighbors United; Hughson Family Resource Center; Turlock Family Resource Center. Differential Response program also serves some targeted groups: Hutton House which works with teenagers and their parents; and Health Services Agency, Public Health for substance exposed infants.

Intensive Family Reunification Services and Adoption Promotion and Support

Sierra Vista Counseling

Sierra Vista is a counseling organization that offers individual group counseling regarding issues of anger management, trauma, mental health, and school age issues. They have services to address the special needs of children who are not successful in a regular day school including an ADHD clinic. Priority for services is given to children who are at high risk, including children who are being served by the county welfare departments for being abused and neglected, pre adoptive families, and other children who are referred for services by legal, medical, or social services agencies. Individual and group counseling services for adults and children to help break the cycle of abuse and children receive individual and group counseling to help heal the wounds and increase their personal safety. Domestic violence treatment, anger management treatment and Spanish speaking services are available. Parenting is offered individually, in a group, parent child labs and activities that expedite and support the adoption process.

Haven Women's Center Kids Count

The Kid Count! Program is a school based program offered to children residing within Stanislaus County. The purpose of the program is to increase children's knowledge in the area of safety planning and reduce their risk of child abuse and neglect. The program is a repeating eight week course that focuses on creating a safety plan, reducing self blame for family violence, appropriate ways to express anger, expression of feelings, and building self esteem. Children are referred by their school and increased awareness of issues of domestic violence, and making good choices for themselves around safety are measured.

ATTACHMENTS

Stanislaus County
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CAPC MEMBERS ADDRESSES

LAST NAME	FIRST NAME	ADDRESS
Ahyou	Kristie	Stanislaus County Coroner's Office 1010 – 10 th Street Modesto, CA
Carroll	Adrian	BHRS 800 Scenic Drive Modesto CA 95358
Chapman	Dave	Probation 2215 Blue Gum Ave Modesto CA 95358
Currie	Rachelle	Haven Women's Center 618 – 13 th Street Modesto CA 95354
Dickinson	Robin	Valley Mountain Regional Center 1820 Blue Gum Ave Modesto CA 95358
Filgas	Bergen	Community Services Agency 251 E. Hackett Rd Modesto CA 95354
Fisher	Nancy	Community Partner 830B Scenic Drive Modesto CA 95350
Fitzgerald	Ken	SCOE 1100 H Street Modesto CA 95354
Fontana	Vicki	Hughson Family Resource Center 2413 – 3 rd Street Hughson CA 95326
Garcia	Colleen	Children's Crisis Center 1244 Fiori Ave Modesto CA 95350
Isola-Amato	Teri	Sierra Vista Child & Family Services 100 Poplar Ave Modesto CA 95354
Junker	Harald	Bank of the West 3801 Pelandale Ave – Ste C Modesto CA 95356
Kennedy	Stephanie	Superior Court 800 11 th Street Modesto CA 95354
Mesa	Joseph	Parent Representative 1017 Woodrow Ave Modesto CA 95367
McDowall	Evelina	Health Services Agency 830B Scenic Drive Modesto, CA

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Muralt	Taryn	Center for Human Services 1700 McHenry Ave – Ste 11 Modesto CA
Palombi	John	Parent Representative 1017 Woodrow Ave Modesto CA 95367
Parman	Nelda	Sierra Vista Child & Family Services 912 Sierra Drive Modesto CA 95351
Quach	Cam	Children's Crisis Center 1244 Fiori Ave Modesto CA 95350
Rolicheck	Belinda	Haven Women's Center 618 – 13 th Street Modesto CA 95354
Salaiz	Sharon	Aspiranet 151 E. Canal Drive Turlock CA 95380
Servas	Karen	Community Partner karenservas@gmail.com
Shiple	Carol	District Attorney's Office Victim Services 832 – 12 th Street – Ste 300 Modesto CA 95326
Silvestre	Leah	Parent Resource Center 811 5 th Street Modesto CA 95351
Vlss	Jan	Community Services Agency 251 E. Hackett Rd Modesto CA 95354

WORKSHEETS

WORKSHEETS

THREE-YEAR CAPIT/CBCAP/PSSF SERVICES AND EXPENDITURE SUMMARY
PROPOSED EXPENDITURES
WORKSHEET 1

(1) COUNTY: Stanislaus		(2) PERIOD OF PLAN: 9/18/10 thru 6/30/11				(3) YEAR: 1		OTHER:							
(4) FUNDING ESTIMATES		CAPIT: \$163,980	CBCAP: \$69,400.00	PSSF: \$460,297.00											
Line No	Title of Program / Practice	SIP Strategy No., if applicable	Name of Service Provider, if available	CBCAP			PSSF			OTHER SOURCE	NAME OF OTHER	TOTAL			
				CAPIT	CBCAP		From Column H								
				Dollar amount that will be spent on CAPIT Direct Services	Dollar amount that will be spent on CBCAP Direct Services	Dollar amount that will be spent on Public Awareness, Brief Information or Referral Activities	Dollar amount of CBCAP allocation to be spent on all CBCAP activities — sum of columns F1, F2, F3	Dollar amount of PSSF allocation that will be spent on PSSF activities — sum of columns G2, G3, G4, G5	Dollar amount of Column G that will be spent on Family Preservation	Dollar amount of Column G that will be spent on Family Support	Dollar amount of Column G that will be spent on Time-Limited Reunification	Dollar amount of Column G that will be spent on Adoption Promotion & Support	Dollar amount that comes from other funding source(s)	List the name(s) of the other funding source(s)	Total dollar amount to be spent on this Program / Practice — sum of columns E, F4, G1, H1
1	Intensive Family Reunification Services	N/A	Aspira Pro-Family				\$ 95,950								\$ 95,950
2	Drug Treatment		Nivana				\$ 114,128		\$ 40,668	\$ 73,460	\$ -				\$ 114,128
3	Counseling Services		Sierra Vista	\$ 90,125			\$ 90,259					\$ 90,259			\$ 180,384
4	Drug Treatment		Stanislaus Recovery Services				\$ -	\$ 120,210	\$ 96,540	\$ 23,670					\$ 120,210
5	Adoption Support		Adoption Support Group				\$ -	\$ 1,800				\$ 1,800			\$ 1,800
6	Counseling		First Step	\$ 75,855			\$ -	\$ 37,950	\$ 37,950						\$ 113,805
7	Drug Treatment and parenting	2.4		\$ -			\$ -	\$ -							\$ -
8	Hutton House		Hutton House		\$ 36,252		\$ 36,252	\$ -							\$ 36,252
9	Children's Crisis Center		Children's Crisis Center	\$ 33,148			\$ 33,148	\$ -							\$ 33,148
10	Children's Crisis Center		Children's Crisis Center												
11	Intensive Family Reunification Services	N/A	Aspira Pro-Family				\$ 95,950			\$ 95,950					\$ 95,950
TOTAL				\$ 163,980	\$ 69,400	\$ 69,400	\$ 460,297	\$ 745,328	\$ 97,180	\$ 878,507	\$ 921,087	\$ 921,087	\$ -	\$ -	\$ 2,676,679

**THREE-YEAR CAPIT/CBCAP/PSSF SERVICES AND EXPENDITURE SUMMARY
PROPOSED EXPENDITURES
WORKSHEET 1**

(1) COUNTY: Stanislaus		(4) FUNDING ESTIMATES		(2) PERIOD OF PLAN:					(3) YEAR: 2 and 3		OTHER:						
				CAPIT:		CBCAP:		PSSF:									
				\$163,980		\$23,148.00		\$460,297.00									
Line No.	Title of Program / Practice	SIP Strategy No., if applicable	Name of Service Provider, if available	CAPIT	CBCAP			ESSF			OTHER SOURCES	NAME OF OTHER	TOTAL				
				Dollar amount that will be spent on CAPIT Direct Services	Dollar amount that will be spent on CBCAP Direct Services	Dollar amount that will be spent on CBCAP Info Structure	Dollar amount that will be spent on Public Awareness, Brief Information or Federal Activities	Dollar amount or CBCAP allocation to be spent on all CBCAP activities	Dollar amount of PSSF allocation that will be spent on all activities	Dollar amount of Column G that will be spent on Family Preservation	Dollar amount of Column G that will be spent on Family Support	Dollar amount of Column G that will be spent on Reunification	Dollar amount of Column G that will be spent on Adoption Promotion & Support	Dollar amount that comes from other sources	List the name(s) of the other funding source(s)	Total dollar amount to be spent on this Program / Practice	
1	Drug Treatment and parenting		Sierra Vista	\$75,855				\$0	\$0								\$75,855
2	Drug Treatment		Sierra Vista					\$0	\$0								\$0
3	Counseling Services		Sierra Vista	\$90,125				\$0	\$90,259	\$ 40,668	\$ 73,460	\$ -	\$ 90,259				\$180,384
4	Drug Treatment		Stanislaus Recovery Services					\$0	\$120,210	\$ 96,540	\$ 23,670		\$ 1,800				\$120,210
5	Adoption Support		Adoption Support Group					\$0	\$1,800								\$1,800
6	Counseling		Sierra Vista					\$0	\$37,950	\$ 37,950							\$37,950
7	Drug Treatment and parenting		First Step					\$0	\$0								\$0
8	pending RFP		pending RFP	\$33,148				\$33,148	\$0								\$33,148
9	Intensive Family Reunification Services		Aspira Pro-Family					\$0	\$0								\$0
10								\$0	\$0								\$0
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**THREE-YEAR CAPIT/CBCAP/PSF SERVICES AND EXPENDITURE SUMMARY
CAPIT PROGRAMS, ACTIVITIES AND GOALS
WORKSHEET 2**

(1) COUNTY: Stanislaus		(2) YEAR: 2010-2011																
Line No.	Title of Program/Practice	Unmet Need	CAPIT Direct Service Activity													Other Direct Service Activity (Provide Title)	Goal	
			Family Counseling	Parent Education & Support	Home Visiting	Psychiatric Evaluation	Respite Care	Day Care/Child Care	Transportation	MDT Services	Homenakers	Teaching & Demonstrating	Family Workers	Temporary In Home Caretakers	Health Services			Special Law Enforcement
7	Drug Treatment and Parenting	Substance abuse treatment and parent education pg. 33		X					X									Families Are Free from Substance Abuse and Mental Illness
3	Counseling	Counseling pg. 33	X	X		X												Families Are Strong and Connected

**THREE-YEAR CAPIT/CBCAP/PSSF SERVICES AND EXPENDITURE SUMMARY
CBCAP PROGRAMS, ACTIVITIES AND GOALS
WORKSHEET 3**

(1) COUNTY: Stanislaus		(2) YEAR: 2010-2011																								
Line No.	Title of Program/Practice	Unmet Need	Public Awareness, Brief Information or Information Referral	CBCAP Direct Service Activity							Other Direct Service Activity (Provide Title)	Logic Model Expts		EBP / EIP (Identify Level)					County has documentation on file to support Level selected	Goal						
				E1	E2	E3	E4	E5	E6	E7		G1	G2	H1	H2	H3	H4	H5								
A	B	C	D	Parenting Program (Classes)	Parent Mutual Support	Respite Care	Family Resource Center	Family Support Program	Other Direct Service	F																
8	Hutton House	Respite services and family support for children ages 13-17 pg. 37					x		x																	Communities Are Caring And Responsive
9	Children's Crisis Center	Respite services and family support for children 6-12 pg. 35					x		x																	Vulnerable Communities Have Capacity to Respond

THREE-YEAR CAPIT/CBCAP/PSSF SERVICES AND EXPENDITURE SUMMARY

PSSF PROGRAMS, ACTIVITIES AND GOALS
WORKSHEET 4

(1) COUNTY: Stanislaus		(2) YEAR: 2010-2011																														
Line No.	Title of Program/Practice	Unmet Need	PSSF Family Support Services (Community Based)										Time Limited Family Reunification Services							Adoption Promotion and Support Services					Other Direct Service Activity (Provide Title)	Goals						
			PSSF Family Preservation					PSSF Family Support Services (Community Based)					Time Limited Family Reunification Services							Adoption Promotion and Support Services												
			D1	D2	D3	D4	D5	D6	D7	E1	E2	E3	E4	E5	E6	E7	E8	F1	F2	F3	F4	F5	F6	F7	G1	G2	G3	G4	G5			
A																																
1	Aspira Pro-Family	Intensive Family Reunification pg. 36-39					X											X					X									Children and Youth Are Nurtured, Safe and Engaged
2	Nirvana	Drug treatment pg. 33	X					X				X																				Families Are Free from Substance Abuse and Mental Illness
3	Sierra Vista	Counseling pg. 89																						X								Families Are Strong and Connected
4	Stanislaus Recovery Services	Drug treatment pg. 33	X				X					X				X																Families Are Free from Substance Abuse and Mental Illness
5	Adoption Support Group	Group Counseling pg. 45																						X								Identified Families Access Services and Supports

END NOTES

¹ Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., Williams, D., Simon, V., Hamilton, D., Lou, C., Peng, C., Moore, M., Jacobs, L., & King, B. (2011). *Child Welfare Services Reports for California*. Retrieved 10/4/2011, from University of California at Berkeley Center for Social Services Research website. URL: <http://cssr.berkeley.edu/ucb_childwelfare>

² Children's Research Center Safe Measures Data. Stanislaus County, CFSR Measure C4.3: Placement Stability (Over 24 Months in Care). Retrieved [08/30/2011] from Children's Research Center website. URL: <<https://www.safemeasures.org/ca/safemeasures.aspx>>

³ Children's Research Center Safe Measures Data. Stanislaus County, CFSR Measure C1.1 & C1.2: Reunification within 12 months (Exit Cohort). Retrieved [08/30/2011] from Children's Research Center website. URL: <<https://www.safemeasures.org/ca/safemeasures.aspx>>

⁴ Children's Research Center Safe Measures Data. Stanislaus County, CFSR Measure C1.4: Reentry Following Reunification. Retrieved [08/6/2011] from Children's Research Center website. URL: <<https://www.safemeasures.org/ca/safemeasures.aspx>>

⁵ Children's Research Center Safe Measures Data. Stanislaus County, CFSR Measure 2.B: Referrals by Time to Investigation (Ten-day). Retrieved [10/10/2011] from Children's Research Center website. URL: <<https://www.safemeasures.org/ca/safemeasures.aspx>>

⁶ Children's Research Center Safe Measures Data. Stanislaus County, Primary Assignment by Service Component. Retrieved [08/6/2011] from Children's Research Center website. URL: <<https://www.safemeasures.org/ca/safemeasures.aspx>>